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Syllabus for The post of Swasthya Shiksha Adhikari

Screening Exam

Subject – Social Science Related Knowledge

1. Sociology

Health: meaning, theoretical dimensions - conflict, functional and interactionist. Health in India - rural and urban gap, malnutrition and poverty, sanitation problems.
Social dimensions of health; Social factors of health, economic status (rich vs poor), education, occupation, gender and caste, living conditions (urban vs rural).
Health and culture: food habits, hygiene practices, beliefs and behavior about disease, social responsibility towards illness.
social prejudice related to diseases (HIV, AIDS, CANCER) etc.
Health inequalities: class inequality, gender inequality, caste inequality, government policies related to health like Ayushman Bharat, NRHM and its impact on community.

2. Anthropology

Anthropology and its relevance and significance in social science; Human Variation: Tribal, Rural and Urban Population; Public Health : Definition, Parameters, Components, Human Diseases and Health, Genetic and Communicable Diseases, their eradication; Human Blood Groups : ABO, MN, Rh and their applications

3. Psychology

Meaning, methods, scope of psychology & goals, Heredity and Environment, Meaning and law of perception. Learning, Memory & forgetting – Classical & instrumental conditioning, Short-term and Long-term Memory, Causes of Forgetting, Nature & Theory of intelligence. Psychological assessment, Motivation & Personality - Psychological test, Criteria of motivated behavior, language development, Definition and type of personality. Problems of Contemporary society – Drug addiction, The Problems of aged, Stress & Health, Juvenile delinquency

4. Social psychology

Basic Human values and attitude: nature, sources and features of values. Nature, formation and function of attitudes.

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Social Control: Purpose, causes and agencies. Social Change: Problems, causes and theories.

Communication and persuasive communication: nature, theories, determinants and resistance to persuasion. Social interaction and interpersonal attraction.

Community health : Nature, types and role of community health. Nature and types of counseling, Yoga and health.

5. Political Science

Indian Constitution: preamble, fundamental rights, directive principles of state policy, fundamental duties.

Government and Politics: Parliament and state legislature- function, power, privileges; Executive- President, Prime Minister, Council of Ministers, Governor and Chief Minister.

Judiciary: Supreme Court and High Court- structure and power.

Local Self Government: Panchayat Raj/Municipalities

Constitutional bodies : Election Commission, Finance Commission, Union Public Service Commission, Comptroller and Auditor General.

Governance and Public Policy : Role of government, non-governmental organizations and civil society organisations in development of social sectors.

6. Geography

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Meaning and significance of Health geography; Geographical factors affecting human health & diseases - physical, social, economic and environmental.

Impact of environmental degradation and natural disaster on human health and its management.

Classification of genetic, communicable, non-communicable diseases. Geography of hunger, malnutrition and food security.

Pattern of distribution of major diseases worldwide and in India. Health care planning and policies of India.

7. History

Vedic Literature, Mauryan and Kushana Art, Stupa and Temple Architecture.

Significant events of Modern Indian History specially freedom struggle.

Integration of Princely States and re-organization of States after Independence.

Important events of World history between 18th and 20th century – French revolution, Industrial revolution, First and Second world war : causes and effects.

8. Economics

National income, Economic indicators - poverty, unemployment, inequality and human development index (HDI). Types of healthcare goods, role of health and education in sectoral composition.

Demography: Population, rural-urban migration and health services, malnourishment and its types and environmental health.

Health governance : role of NITI Ayog, panchayati raj Institutions and urban local bodies in health governance.

Healthcare Infrastructure: health facilities centres, rural health workforce, digital and mobile health infrastructure.

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CHAPTER 01
Meaning and Nature of Health

1. According to the World Health Organization (1948) definition, health is a state of complete physical, mental, and social well-being and not merely the absence of:
(A) Poverty and disability
(B) Disease or infirmity
(C) Social conflict and stress
(D) Biological malfunction

2. Which model of health focuses primarily on the biological factors of disease and treats the human body like a machine to be repaired?
(A) Biomedical model
(B) Social model
(C) Holistic model
(D) Ecological model

3. Which of the following statements best describes the Social Model of Health?
(A) It emphasizes that health is solely determined by individual lifestyle choices.
(B) It focuses on the diagnosis and treatment of specific pathogens.
(C) It addresses the socio-economic and environmental determinants of health.
(D) It views health as a spiritual connection between the body and soul.

4. The following question consists of two statements — Assertion (A) and Reason (R). Answer the question by selecting the appropriate option.
Assertion (A): The Holistic model of health considers the person as a whole, including physical, mental, and spiritual aspects.
Reason (R): It emphasizes the balance between the individual and the environment rather than just the absence of symptoms.
(A) Both A and R are true and R is the correct explanation of A.
(B) Both A and R are true but R is not the correct explanation of A.
(C) A is true but R is false.
(D) A is false but R is true.

5. Which of the following is NOT an indicator of the physical dimension of health?
(A) Skin complexion and hair texture
(B) Regularity of bowel and bladder functions
(C) Ability to express emotions appropriately
(D) Sensory organ functionality

6. Which pair is correctly matched regarding dimensions of health?
(A) Social Dimension – Focusing only on individual biological functioning
(B) Mental Dimension – Clear and logical thinking
(C) Spiritual Dimension – Adherence to organized religious rituals and practices
(D) Physical Dimension – Maintaining high financial status and wealth

7. Match List I with List II and select the correct answer using the codes given below:
List I: (Dimension)
P. Social Dimension
Q. Mental Dimension
R. Physical Dimension
S. Spiritual Dimension
List II: (Focus)
1. Anatomical integrity and physiological function
2. Integration and social support systems
3. Meaning and purpose in life
4. Cognitive abilities and emotional stability
(A) P-1, Q-2, R-3, S-4
(B) P-4, Q-3, R-2, S-1
(C) P-3, Q-1, R-4, S-2
(D) P-2, Q-4, R-1, S-3

8. Which of the following is an INCORRECT pair regarding health concepts?
(A) Health – The presence of clinical symptoms
(B) Illness – Subjective experience of being unwell
(C) Sickness – Social role and status of the

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person
(D) Disease – Pathological process identified by medical signs

9. Which dimension of health is specifically concerned with a person's ability to manage stress and maintain a positive self-image?
(A) Professional and occupational dimension
(B) Ecological and environmental dimension
(C) Psychological and mental dimension
(D) Biological and physical dimension

10. Consider the following statements regarding Positive Health:
1. It represents the "perfect" state of health where all dimensions are in harmony.
2. It is a static state achieved only once in a lifetime.
3. It involves the person functioning at their maximum potential.

Which of the above statements are correct?
(A) 1 and 2 only
(B) 2 and 3 only
(C) 1 and 3 only
(D) 1, 2, and 3

11. The concept of "Health as a continuum" implies that:
(A) Health is a fixed point characterized by zero disease symptoms.
(B) Health is a series of separate and unrelated medical categories.
(C) Health is a binary state of either healthy or sick status.
(D) Health is a dynamic state from optimum wellness to premature death.

12. Read the following statements and select the correct option.
Statement I: Wellness is a proactive and preventive approach to health.
Statement II: Health is often viewed as the outcome or state of being.
(A) Statement I is correct, but Statement II is incorrect.
(B) Statement II is correct, but Statement I is incorrect.
(C) Both statements are correct.
(D) Neither statement is correct.

13. The following question consists of two statements — Assertion (A) and Reason (R). Answer the question by selecting the appropriate option.
Assertion (A): In the biomedical view, disease is considered an objective phenomenon.
Reason (R): It can be measured through clinical tests, physical signs, and laboratory findings.
(A) Both A and R are true and R is the correct explanation of A.
(B) Both A and R are true but R is not the correct explanation of A.
(C) A is true but R is false.
(D) A is false but R is true.

14. A patient visits a doctor complaining of fatigue and sadness despite all blood tests being normal. This subjective feeling of being unwell is termed as:
(A) Disease
(B) Sickness
(C) Malignancy
(D) Illness

15. According to the "Sick Role" theory, which of the following is a key feature?
(A) The person is exempted from normal social responsibilities.
(B) The individual is held strictly accountable for their health.
(C) The individual is expected to recover without medical aid.
(D) The individual achieves elevated social status through illness.

16. Match List I with List II and select the correct answer using the codes given below:
List I: (Term)
P. Medicalization
Q. Disease
R. Illness
S. Sickness
List II: (Definition)
1. Subjective experience of the individual
2. Social state of being defined as unwell
3. Treating non-medical conditions as medical problems
4. Objective biological dysfunction
(A) P-1, Q-2, R-3, S-4
(B) P-3, Q-4, R-1, S-2
(C) P-4, Q-3, R-2, S-1

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(D) P-2, Q-1, R-4, S-3

17. Which of the following is an example of the "Medicalization of everyday life"?
(A) Prescribing advanced antibiotic regimens for bacterial infections.
(B) Defining menopause or aging as a medical condition for treatment.
(C) Performing complex orthopedic surgeries for traumatic bone fractures.
(D) Developing routine vaccination schedules for school-aged children.

18. Arrange the following levels of prevention in the correct sequence from earliest intervention to latest:
1. Secondary Prevention
2. Tertiary Prevention
3. Primary Prevention
(A) 1—2—3
(B) 3—1—2
(C) 2—3—1
(D) 3—2—1

19. Which Article of the Indian Constitution is interpreted by the Supreme Court to include the "Right to Health" as an integral part of the Right to Life?
(A) Article 14
(B) Article 19
(C) Article 21
(D) Article 32

20. Consider the following strategies of the World Health Organization Ottawa Charter:
1. Strengthening community action.
2. Building healthy public policy.
3. Limiting health services to hospitals only.
Which of the above statement(s) is/are correct action areas of the Ottawa Charter?
(A) 1 and 2 only
(B) 2 and 3 only
(C) 1 and 3 only
(D) 1, 2, and 3

21. Which of the following is an INCORRECT statement regarding levels of prevention?
(A) Primary prevention aims to inhibit the initial onset of disease.
(B) Secondary prevention involves early diagnosis and prompt treatment.
(C) Tertiary prevention focuses on health promotion among healthy individuals.
(D) Tertiary prevention aims at rehabilitation and minimizing disability.

22. The following question consists of two statements — Assertion (A) and Reason (R). Answer the question by selecting the appropriate option.
Assertion (A): Secondary prevention is often more cost-effective than tertiary prevention.
Reason (R): It identifies disease in its early stages before permanent damage occurs.
(A) Both A and R are true and R is the correct explanation of A.
(B) Both A and R are true but R is not the correct explanation of A.
(C) A is true but R is false.
(D) A is false but R is true.

23. Which of the following is considered an individual-level determinant of health?
(A) National GDP
(B) Air quality regulations
(C) Genetic inheritance
(D) Global trade policies

24. Which of the following is NOT a societal-level determinant of health?
(A) Social support networks
(B) Quality of housing
(C) Level of education in a community
(D) Individual dietary preferences

25. Match List I with List II and select the correct answer using the codes given below:
List I: (Type of Health)
P. Reproductive Health
Q. Occupational Health
R. Environmental Health
S. Mental Health
List II: (Key Scope)
1. Safety and well-being at the workplace
2. Safe motherhood and family planning
3. External factors like pollution and sanitation
4. Cognitive and emotional well-being
(A) P-1, Q-2, R-3, S-4
(B) P-4, Q-3, R-2, S-1
(C) P-2, Q-1, R-3, S-4
(D) P-3, Q-4, R-1, S-2

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26. Read the following statements and select the correct option.
Statement I: Occupational health focuses only on preventing physical injuries like falls.
Statement II: Occupational health also includes the psychological well-being of workers.
(A) Statement I is correct, but Statement II is incorrect.
(B) Statement II is correct, but Statement I is incorrect.
(C) Both statements are correct.
(D) Neither statement is correct.

27. Which pair is correctly matched?
(A) IMR – Total deaths of children under 5 years per 1,000 live births.
(B) Life Expectancy – The absolute maximum biological age a human can reach.
(C) Community Health – Focusing exclusively on the health of the individual.
(D) MMR – Pregnancy-related deaths per 100,000 live births.

28. Consider the following statements about Community Health:
1. It focuses on the health status of a defined group of people.
2. It emphasizes collective action and environmental interventions.
3. It is identical to clinical medicine in its approach to treatment.
Which of the above statements are correct?
(A) 1 and 2 only
(B) 2 and 3 only
(C) 1 and 3 only
(D) 1, 2, and 3

29. Which of the following is an INCORRECT pair regarding health indicators?
(A) Infant Mortality Rate – Measure of child survival
(B) Life Expectancy – Measure of longevity
(C) Morbidity Rate – Measure of death in a population
(D) Maternal Mortality Ratio – Measure of health system quality for women

30. The concept of "Epidemiological Transition" refers to:
(A) Shift from infectious to chronic/degenerative diseases.
(B) Widespread change from modern clinical to traditional medicine.
(C) Migration of medical professionals from rural to urban areas.
(D) Structural transition from private to public healthcare systems.

31. The following question consists of two statements — Assertion (A) and Reason (R). Answer the question by selecting the appropriate option.
Assertion (A): A high Infant Mortality Rate (IMR) is often considered a sensitive indicator of the overall socio-economic development of a country.
Reason (R): It reflects the availability of clean water, nutrition, and basic health services.
(A) Both A and R are true and R is the correct explanation of A.
(B) Both A and R are true but R is not the correct explanation of A.
(C) A is true but R is false.
(D) A is false but R is true.

32. What does the term "Life Expectancy at Birth" specifically measure?
(A) Standard age at which the majority of people die in a specific year.
(B) Total percentage of the population that survives to reach age sixty.
(C) Calculation of total annual births subtracted from total annual deaths.
(D) Average years a newborn lives under current mortality rates.

33. A community implements a program to provide clean drinking water to prevent cholera. This is an application of:
(A) Secondary prevention
(B) Tertiary prevention
(C) Primary prevention
(D) Curative medicine

34. Match List I with List II and select the correct answer using the codes given below:
List I: (Concept)
P. Health Transition
Q. Negative Health
R. Wellness
S. Social Health
List II: (Definition/Context)

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1. Ability to interact and maintain relationships
2. Presence of disease or disability
3. Shift in disease patterns and life expectancy
4. Active process of becoming aware of a healthy life

(A) P-1, Q-2, R-3, S-4
(B) P-3, Q-2, R-4, S-1
(C) P-4, Q-3, R-2, S-1
(D) P-2, Q-1, R-4, S-3

35. Which of the following is the most appropriate definition of the Social Dimension of health?
(A) Complete absence of interpersonal conflict within the family unit.
(B) Individual ability to earn a high income for healthcare expenses.
(C) Quality of interpersonal ties and community involvement.
(D) Psychological state of being entirely free from all social stigma.

36. Which of the following is NOT a core action area mentioned in the World Health Organization Ottawa Charter (1986)?
(A) Developing essential personal and social skills
(B) Reorienting existing medical and health services
(C) Creating various supportive social environments
(D) Centralizing healthcare decision-making

37. Consider the following statements about Medicalization:
1. It expands the authority of the medical profession into daily life.
2. It can lead to the over-prescription of drugs for natural life stages.
3. It strictly refers to the improvement of surgical techniques.

Which of the above statements are correct?
(A) 1 and 2 only
(B) 2 and 3 only
(C) 1 and 3 only
(D) 1, 2, and 3

38. Read the following statements and select the correct option.
Statement I: Health as a human right implies that the government must guarantee "perfect health" to every citizen.
Statement II: The Right to Health involves the right to a system of health protection and the prevention of epidemics.
(A) Statement I is correct, but Statement II is incorrect.
(B) Statement II is correct, but Statement I is incorrect.
(C) Both statements are correct.
(D) Neither statement is correct.

39. Environmental health is primarily concerned with:
(A) Providing direct medical treatment in specialized clinical settings.
(B) Monitoring the internal biological environment of human cells.
(C) Managing external physical, chemical, and biological factors.
(D) Encouraging individuals to engage in regular exercise in parks.

40. The following question consists of two statements — Assertion (A) and Reason (R). Answer the question by selecting the appropriate option.
Assertion (A): Vaccination is a primary prevention strategy.
Reason (R): It is applied to individuals who have already contracted the disease to prevent complications.
(A) Both A and R are true and R is the correct explanation of A.
(B) Both A and R are true but R is not the correct explanation of A.
(C) A is true but R is false.
(D) A is false but R is true.

41. In which year did the World Health Organization establish its widely used definition of health?
(A) 1945
(B) 1948
(C) 1950
(D) 1962

42. Which of the following is a common criticism of the Biomedical Model of health?
(A) Relying excessively on external social and economic factors.
(B) Ignoring psychological and social variables on health.
(C) Focusing primarily on disease prevention

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rather than acute cure.
(D) Utilizing an overly spiritual or metaphysical diagnostic approach.

43. Match List I with List II and select the correct answer using the codes given below:
List I: (Indicator)
P. IMR
Q. MMR
R. Life Expectancy
S. CDR (Crude Death Rate)
List II: (Data Point)
1. Total deaths per 1000 population
2. Average years lived
3. Deaths per 1000 live births
4. Deaths per 100,000 live births
(A) P-1, Q-2, R-3, S-4
(B) P-4, Q-3, R-2, S-1
(C) P-3, Q-4, R-2, S-1
(D) P-2, Q-1, R-4, S-3

44. Which concept refers to the social state of being unwell, characterized by the expectations and roles society places on the sick person?
(A) Illness
(B) Disease
(C) Pathology
(D) Sickness

45. Consider the following statements regarding the Social Determinants of Health:
1. Income and social status are major determinants.
2. Physical environment and education level play a minor role.
3. Access to health services is a key societal factor.
Which of the above statements are correct?
(A) 1 and 2 only
(B) 1 and 3 only
(C) 2 and 3 only
(D) 1, 2, and 3

46. Which pair is correctly matched regarding dimensions of health?
(A) Spiritual Dimension – Improving physical strength and cardiovascular endurance
(B) Emotional Dimension – Ability to recognize and accept one's feelings
(C) Social Dimension – Developing intellectual IQ and cognitive memory capacity
(D) Physical Dimension – Adhering to specific moral ethics and personal values

47. Which of the following is NOT an individual-level determinant of health?
(A) Maintaining rigorous personal hygiene
(B) Managing individual dietary habits
(C) Engaging in regular physical activity
(D) Public sanitation infrastructure

48. Arrange the phases of Epidemiological Transition in chronological order:
1. Age of Receding Pandemics
2. Age of Degenerative and Man-made Diseases
3. Age of Pestilence and Famine
(A) 1—2—3
(B) 3—1—2
(C) 2—3—1
(D) 3—2—1

49. Which of the following is the most appropriate description of "Positive Health"?
(A) Simply remaining free from any clinically diagnosed disease.
(B) Possessing access to the most advanced medical treatments.
(C) Maintaining homeostasis and withstanding stress.
(D) Maintaining subjective happiness regardless of physical status.

50. Read the following statements and select the correct option.
Statement I: Reproductive health implies that people are able to have a responsible, satisfying, and safe sex life.
Statement II: Reproductive health is limited only to the prevention of maternal mortality.
(A) Statement I is correct, but Statement II is incorrect.
(B) Statement II is correct, but Statement I is incorrect.
(C) Both statements are correct.
(D) Neither statement is correct.

51. The "subjective experience" of a patient feeling pain or discomfort is best described as:
(A) Clinical Disease
(B) Social Sickness
(C) Illness

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(D) Physiological abnormality

52. In the "Sick Role" theory, what is one of the defined "duties" of the sick person?
(A) Extending the period of exemption from social work as long as possible.
(B) Maintaining all primary social and professional roles despite illness.
(C) Negotiating and paying for all medical services in advance of treatment.
(D) Seeking competent help and cooperating with physicians.

53. Which of the following is a correct statement about the World Health Organization Ottawa Charter?
(A) Focused strictly on curative hospital-based interventions.
(B) Formally signed and ratified in the year 1948.
(C) First International Conference on Health Promotion.
(D) Explicitly rejected the broader social model of health.

54. Which of the following is an INCORRECT statement regarding the Spiritual dimension of health?
(A) It involves a search for meaning and purpose in human existence.
(B) It is synonymous with practicing a specific organized religion.
(C) It includes principles, ethics, and a sense of self-awareness.
(D) It can exist independently of religious affiliation.

55. Which pair is incorrectly matched regarding the levels of prevention?
(A) Primary Prevention – Health education
(B) Secondary Prevention – Screening programs
(C) Secondary Prevention – Early diagnosis
(D) Tertiary Prevention – Immunization

56. Which of the following is a correct pair?
(A) Environmental Health – Individualized genetic screening and counseling
(B) Occupational Health – Ergonomics and workplace safety
(C) Mental Health – Immediate surgical treatment of acute physical fractures
(D) Social Health – Use of antibiotics for bacterial infection control

57. Which of the following represents a negative view of health?
(A) Health is the absence of disease and infirmity.
(B) Health is a state of physical and mental harmony.
(C) Health is the ability to lead a socially productive life.
(D) Health is a dynamic process of adaptation.

58. Which of the following is the best definition of Mental Health?
(A) Total and continuous absence of any sadness or emotional grief.
(B) Capacity to work 12 hours a day without any signs of fatigue.
(C) Well-being where one copes with stress and realizes potential.
(D) Achieving an exceptionally high score on a standardized IQ test.

59. A person undergoing physiotherapy after a stroke to regain mobility is an example of:
(A) Primary prevention
(B) Secondary prevention
(C) Tertiary prevention
(D) Primordial prevention

60. Read the following statements and select the correct option.
Statement I: The social model of health ignores the biological basis of disease.
Statement II: The social model emphasizes that health is influenced by political and economic factors.
(A) Statement I is correct, but Statement II is incorrect.
(B) Statement II is correct, but Statement I is incorrect.
(C) Both statements are correct.
(D) Neither statement is correct.

61. What is the standard denominator used for calculating the Maternal Mortality Ratio (MMR)?
(A) 1,000 live births
(B) 10,000 live births
(C) 1,00,000 live births

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(D) 1,00,000 total pregnancies

62. Which theorist is credited with introducing the concept of the "Sick Role" in the study of social systems?
(A) Robert Merton
(B) Max Weber
(C) Emile Durkheim
(D) Talcott Parsons

63. Which of the following is a correct statement regarding "Health Promotion"?
(A) Providing standard pharmaceutical medical treatments.
(B) Applying strictly to individuals who are already sick.
(C) Enabling people to increase control over their health.
(D) Focusing only on individual-level genetic modifications.

64. Which dimension of health focuses on the harmony between the individual and the universe?
(A) Mental Dimension
(B) Social Dimension
(C) Emotional Dimension
(D) Spiritual Dimension

65. Which of the following is an INCORRECT statement regarding Reproductive Health?
(A) It only concerns the health of women and excludes men.
(B) It includes the right to safe and effective methods of family planning.
(C) It is a state of complete physical, mental, and social well-being in all matters relating to the reproductive system.
(D) It involves access to healthcare services for safe pregnancy and childbirth.

66. Which pair is correctly matched?
(A) Biomedical Model – Ensuring broad systemic social justice
(B) Holistic Model – Mind, Body, and Spirit integration
(C) Social Model – Focusing exclusively on pathogens and surgery
(D) Traditional Model – Providing universal private health insurance

67. Which of the following is NOT a component of the physical dimension of health?
(A) Maintaining a normal resting pulse rate
(B) Exhibiting clear and healthy skin
(C) Achieving consistent and sound sleep
(D) Good social network

68. Read the following statements and select the correct option.
Statement I: Disease is a biological concept.
Statement II: Sickness is a social concept.
(A) Statement I is correct, but Statement II is incorrect.
(B) Statement II is correct, but Statement I is incorrect.
(C) Both statements are correct.
(D) Neither statement is correct.

69. Regarding the World Health Organization Ottawa Charter on Health Promotion, which of the following statements is correct?
(A) It was organized in London in the year 1990.
(B) It was held in Ottawa, Canada, in 1986.
(C) It was organized in New York in the year 1948.
(D) It was organized in Geneva in the year 1978.

70. A diagnostic test like a Pap smear for early detection of cervical cancer is an example of:
(A) Primary prevention
(B) Secondary prevention
(C) Tertiary prevention
(D) Primordial prevention

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71. "Health is not a fixed entity; it is a state that one gains and loses throughout life." This statement refers to the concept of:
(A) The Biomedical model
(B) The Medicalization theory
(C) The Health Continuum
(D) The Sick Role

72. Which of the following is an example of a societal-level determinant of health?
(A) A person's specific ABO blood type
(B) A person's basal metabolic rate (BMR)
(C) A person's serum vitamin D level
(D) The literacy rate of the community

73. Which of the following is a correct statement about Environmental Health?

(A) Only monitoring and improving indoor air quality.
(B) Excluding social factors like housing and transport.
(C) Managing external physical, chemical, and biological factors.
(D) Branch of medicine that only treats common allergies.

74. Which of the following is an INCORRECT statement about Occupational Health?
(A) It aims at the promotion and maintenance of the highest degree of well-being of workers.
(B) It is only applicable to workers in heavy industries like mining.
(C) It focuses on preventing health problems caused by working conditions.
(D) It includes the protection of workers from risks resulting from factors adverse to health.

75. Which pair is incorrectly matched regarding health indicators?
(A) Life expectancy – Longevity indicator
(B) MMR – Maternal health indicator
(C) IMR – Maternal health indicator
(D) Incidence – New cases of a disease

76. Which of the following is a negative aspect associated with "Medicalization"?
(A) Increasing general life expectancy through advanced technology.
(B) Ensuring that every citizen has guaranteed access to a doctor.
(C) Assisting in the rapid detection of acute infectious diseases.
(D) Turning human problems into medical ones, leading to intervention.

77. Which of the following is NOT part of the standard World Health Organization definition of health?
(A) Financial well-being
(B) Physical well-being
(C) Mental well-being
(D) Social well-being

78. Which of the following is the best description of the "Holistic model" of health?
(A) Treating the human body as a set of independent parts.
(B) Emphasizing medical treatments over lifestyle changes.
(C) Equilibrium between individual and their total environment.
(D) Focusing exclusively on faith-based spiritual healing.

79. If a person feels ill but a medical professional can find no biological cause, the person is experiencing:
(A) Disease but no illness
(B) Sickness but no illness
(C) Illness but no disease
(D) Both disease and illness

80. Read the following statements and select the correct option.
Statement I: Primary prevention is done when the disease is already present.
Statement II: Tertiary prevention is aimed at rehabilitation.
(A) Statement I is correct, but Statement II is incorrect.
(B) Statement II is correct, but Statement I is incorrect.
(C) Both statements are correct.
(D) Neither statement is correct.

81. Which indicator is defined as the number of deaths of infants under one year of age per 1000 live births?
(A) Neonatal Mortality Rate
(B) Infant Mortality Rate
(C) Under-five Mortality Rate
(D) Crude Death Rate

82. Which of the following statements about Article 21 of the Indian Constitution is correct?
(A) A Directive Principle of State Policy in the Constitution.
(B) Fundamental Right that includes the Right to Health.
(C) Provision added by the 42nd Constitutional Amendment.
(D) Deals specifically and only with the right to education.

83. Which of the following is a correct statement about the Epidemiological Transition?
(A) Rise of virulent infectious diseases in developed countries.

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(B) Biological process occurring only in countries with cold climates.
(C) Shift from high infection mortality to low chronic mortality.
(D) Phenomenon completely unrelated to the demographic transition.

84. Which of the following is an INCORRECT statement about "Positive Health"?
(A) It implies a reserve of physical and mental strength.
(B) It is a state where the individual is at peak performance.
(C) It involves a feeling of vitality and purpose.
(D) It is the same as the absence of disease.

85. Which pair is correctly matched?
(A) Sickness – The social status of the unwell
(B) Disease – The subjective feeling of pain
(C) Illness – The biological diagnosis
(D) Health – The absence of social contact

86. Which of the following is a common criticism of the biomedical model?
(A) Achieving major advances in surgery and pharmacology.
(B) Dehumanizing patient by focusing only on broken parts.
(C) Serving as the most comprehensive model of health.
(D) Emphasizing the role of community support systems.

87. Which of the following is the best description of "Wellness"?
(A) Maintaining a static state of being disease-free.
(B) Concept defined as being physically fit and strong.
(C) Active, lifelong process of healthy and fulfilling choices.
(D) State achieved exclusively through medical intervention.

88. A campaign to promote breastfeeding is an example of:
(A) Secondary prevention
(B) Tertiary prevention
(C) Medicalization
(D) Primary prevention

89. Which dimension of health includes the ability to learn from experience and the ability to think logically?
(A) Physical dimension
(B) Social dimension
(C) Mental dimension
(D) Spiritual dimension

90. Read the following statements and select the correct option.
Statement I: Individual determinants of health include age and sex.
Statement II: Societal determinants of health include the political system.
(A) Statement I is correct, but Statement II is incorrect.
(B) Statement II is correct, but Statement I is incorrect.
(C) Both statements are correct.
(D) Neither statement is correct.

91. Consider the following actions related to health promotion:
1. Reorienting health services
2. Developing personal skills
3. Privatizing all health institutions
4. Building healthy public policy

Which of the above are action areas defined by the World Health Organization Ottawa Charter?
(A) 1 and 2 only
(B) 1, 2, and 4 only
(C) 1, 2, and 3 only
(D) 1, 2, 3, and 4

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92. The "Medicalization" of pregnancy implies that:
(A) Women being significantly safer during the childbirth process.
(B) Requirement for all pregnancies to occur in laboratory settings.
(C) Belief that pregnancy is no longer a natural part of human life.
(D) Natural process increasingly treated as a medical emergency.

93. Which of the following is a correct statement about Infant Mortality Rate (IMR)?
(A) It is calculated per 100,000 births.
(B) It is a measure of the health of the elderly.
(C) It is a sensitive indicator of community health and nutrition.
(D) It is higher in developed countries than in

developing countries.

94. Which of the following is an INCORRECT statement about "Health as a Human Right"?
(A) Recognition by the World Health Organization Constitution.
(B) State must provide expensive healthcare regardless of cost.
(C) Access to safe drinking water and basic sanitation services.
(D) Right to be free from any non-consensual medical treatment.

95. Which pair is incorrectly matched regarding dimensions of health?
(A) Spiritual Health – Purpose in life
(B) Mental Health – Coping with stress
(C) Physical Health – Biological integrity
(D) Social Health – Social isolation.

96. Which of the following is a negative consequence of poor occupational health?
(A) Increased productivity
(B) Workplace injuries and chronic illnesses
(C) Higher employee morale
(D) Improved community relationships

97. Which of the following best describes "Epidemiological Transition"?
(A) Pattern change from acute infectious to chronic diseases.
(B) Global discovery of previously unknown viral strains.
(C) Zoonotic movement of diseases from animals to humans.
(D) Statistical increase in the number of doctors in a nation.

98. When a person is excused from their job because they have the flu, they are occupying the:
(A) Professional role
(B) Sick role
(C) Parental role
(D) Deviant role

99. Reproductive health is a component of health that applies to:
(A) Only women's health
(B) Only maternal health
(C) General health throughout the life cycle
(D) Only adolescent health

100. Which of the following is a correct statement about the Health Continuum?
(A) Demonstration that health is a static and fixed achievement.
(B) Suggestion that secondary prevention is the only vital stage.
(C) Claim that spiritual health is the only dimension of importance.
(D) Illustrates that health status is always moving and dynamic.

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ANSWERS

1. (B) Disease or infirmity
WHO defines health as a state of complete physical, mental, and social well-being, and not merely the absence of disease or infirmity. This definition, established in 1948, moved the focus from a purely biological perspective to a comprehensive view of human life. It highlights that being healthy involves the harmonious functioning of multiple interrelated human dimensions.

2. (A) Biomedical model
The biomedical model primarily attributes illness to biological malfunctions or pathogens. This approach views the body as a complex machine where diseases are seen as mechanical breakdowns requiring repair through medical interventions like surgery or medication. It often minimizes the influence of psychological, social, and environmental factors on an individual's overall health and well-being during treatment.

3. (C) It addresses the socio-economic and environmental determinants of health.
The social model of health emphasizes that an individual's well-being is heavily influenced by broader socio-economic and environmental factors. Instead of focusing solely on biological causes, this approach examines how living conditions, education, and income affect health outcomes. It advocates for public policies and community-based interventions to address these systemic determinants, thereby promoting long-term population health.

4. (A) Both A and R are true and R is the correct explanation of A.
The holistic model considers a person as an integrated whole, focusing on the connection between physical, mental, and spiritual aspects. It suggests that health is achieved through balance within the individual and between the individual and their environment. Since it prioritizes total well-being over just symptom management, the explanation provided in the reason logically supports the assertion.

5. (C) Ability to express emotions appropriately
Physical health focuses on the anatomical integrity and physiological functioning of the body. Indicators include skin complexion, hair texture, and efficient organ function. Expressing emotions appropriately is a characteristic of mental or emotional health rather than the physical dimension. Maintaining bodily systems ensures that the physical structure performs its required biological tasks effectively without any significant functional impairment.

6. (B) Mental Dimension – Clear and logical thinking
The mental dimension of health involves the ability to think clearly, logically, and coherently. It encompasses cognitive functions and the capacity to process information effectively. While other dimensions focus on social ties or physical structures, the mental aspect specifically relates to psychological stability and intellectual performance. Achieving this state allows individuals to face life's challenges with balanced judgment.

7. (D) P-2, Q-4, R-1, S-3
Health dimensions are categorized by their specific focus areas within human life. The physical dimension relates to anatomical integrity, while the social dimension concerns interpersonal support systems. Mental health focuses on cognitive and emotional stability, whereas the spiritual dimension involves finding meaning and purpose. This comprehensive classification ensures that all aspects of human existence are considered for overall well-being.

8. (A) Health – The presence of clinical symptoms
Health is defined by the World Health Organization as a state of complete physical, mental, and social well-being, rather than just the presence or absence of clinical symptoms. While disease refers to a biological dysfunction and illness to a subjective experience, health represents a broader positive state. Defining health solely through clinical signs ignores psychological and social factors.

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9. (C) Psychological and mental dimension
The mental dimension of health pertains to an individual's psychological state and cognitive processes. It involves the capacity to manage daily stress, maintain a positive self-image, and develop emotional resilience. This dimension allows people to adapt to life's changes and realize their personal potential. A healthy mental state is essential for making sound decisions and maintaining emotional stability.

10. (C) 1 and 3 only
Positive health represents a state where all dimensions of human well-being are in perfect harmony. It implies that an individual is functioning at their maximum potential rather than just existing without disease. This concept is dynamic and reflects a person's resilience and vitality. It is not a static state but a goal of achieving optimal physiological and psychological functioning.

11. (D) Health is a dynamic state from optimum wellness to premature death.
The health continuum represents health as a dynamic, ever-changing state rather than a fixed point. It spans from a state of optimum wellness at one end to premature death at the other. Individuals move along this spectrum throughout their lives based on lifestyle, environment, and biological factors. This model recognizes that health fluctuates and requires constant active maintenance.

12. (C) Both statements are correct.
Wellness is described as a proactive and preventive process through which individuals become aware of and make choices toward a healthier life. In contrast, health is often viewed as the actual state of being or the outcome of those choices. Both concepts are interrelated, with wellness serving as the active pathway to achieving a positive state of health.

13. (A) Both A and R are true and R is the correct explanation of A.
Within the biomedical framework, disease is viewed as an objective, observable phenomenon rooted in biological dysfunction. Medical professionals use clinical tests, physical signs, and laboratory findings to identify and measure these pathological processes. This approach relies on empirical evidence to diagnose conditions, emphasizing that the underlying cause of illness can be quantified and analyzed through scientific methodology.

14. (D) Illness
Illness refers to the subjective experience of feeling unwell, which may include symptoms like fatigue, pain, or sadness. It represents the personal perception of health status, which can exist even when clinical tests do not show a biological disease. While disease is an objective pathological process, illness is the individual's psychological and physical response to their perceived state.

15. (A) The person is exempted from normal social responsibilities.
The sick role theory suggests that society grants certain privileges and obligations to individuals who are unwell. One primary feature is that the sick person is temporarily exempted from their normal social and professional responsibilities to facilitate recovery. However, this exemption is conditional on the individual's efforts to get well by seeking competent medical help and following treatment.

16. (B) P-3, Q-4, R-1, S-2
Medicalization involves redefining non-medical human conditions as medical problems requiring treatment. Disease is characterized by objective biological dysfunction, while illness is the individual's subjective experience of being unwell. Sickness represents the social state of being recognized by society as unwell. These terms distinguish between the biological, personal, and social aspects of health and pathology in modern society.

17. (B) Defining menopause or aging as a medical condition for treatment.
Medicalization occurs when natural life stages or social conditions are redefined as medical issues that require clinical intervention. Examples include treating aging, menopause, or childbirth as pathological states rather than normal physiological processes. This shift expands the authority of the medical profession over everyday life, often leading to increased pharmaceutical use and clinical monitoring for conditions previously handled socially.

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18. (B) 3—1—2
Prevention levels follow a chronological sequence based on the stage of disease progression. Primary prevention occurs before any disease develops to inhibit its onset. Secondary prevention involves early detection and prompt treatment when the disease is in its initial stages. Tertiary prevention focuses on rehabilitation and minimizing disability after the disease has already caused significant clinical damage or functional loss.

19. (C) Article 21
The Supreme Court of India has interpreted Article 21, which guarantees the Right to Life and Personal Liberty, to encompass the Right to Health. The court argues that the right to live with dignity is impossible without access to basic healthcare facilities. This judicial interpretation makes health an essential component of the fundamental rights promised to every Indian citizen.

20. (A) 1 and 2 only
The Ottawa Charter for Health Promotion outlines five key action areas, including building healthy public policy and strengthening community action. These strategies aim to empower individuals and communities to take control over their health. It emphasizes that health services should be reoriented beyond clinical treatment to include promotion and prevention, rather than being limited exclusively to hospital settings or cures.

21. (C) Tertiary prevention focuses on health promotion among healthy individuals.
Tertiary prevention is specifically designed for individuals who have already experienced significant illness or injury. Its primary goals are to provide rehabilitation, minimize further disability, and improve the quality of life. In contrast, health promotion among healthy individuals is a core component of primary prevention, which aims to prevent the initial occurrence of a disease or health condition.

22. (A) Both A and R are true and R is the correct explanation of A.
Secondary prevention focuses on identifying diseases in their early, often asymptomatic stages through screening and diagnostic tests. By treating conditions before they progress, this level of intervention prevents permanent damage and complex complications. This approach is generally more cost-effective than tertiary prevention, which requires expensive, long-term rehabilitation and management for advanced diseases that have already caused significant functional impairment.

23. (C) Genetic inheritance
Individual-level determinants of health are factors specifically related to a person's unique biological and genetic makeup. Genetic inheritance is a prime example, as it determines susceptibility to certain diseases and influences overall physical development. Unlike broad national policies or environmental regulations, these factors are intrinsic to the individual and play a fundamental role in shaping their personal health profile and risks.

24. (D) Individual dietary preferences
Societal-level determinants of health include broad environmental and social factors that affect entire communities, such as education, housing quality, and social support networks. Individual dietary preferences, however, are considered individual-level determinants as they are based on personal choices and habits. While society influences food availability, the specific choice of what an individual eats is a personal lifestyle factor.

25. (C) P-2, Q-1, R-3, S-4
Different branches of health address specific areas of human well-being. Reproductive health covers safe motherhood and family planning, while occupational health ensures safety and wellness in the workplace. Environmental health manages external factors like pollution and sanitation. Mental health focuses on cognitive and emotional well-being. Together, these fields provide a comprehensive approach to maintaining health across various life domains.

26. (B) Statement II is correct, but Statement I is incorrect.
Occupational health is a comprehensive field that aims to protect the overall well-being of workers. It involves preventing physical injuries through safety measures and ergonomics while also addressing psychological stressors in the workplace. Ensuring a healthy work environment

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requires managing both the physical hazards and the mental health challenges that employees may face during their professional duties and activities.

27. (D) MMR – Pregnancy-related deaths per 100,000 live births.
The Maternal Mortality Ratio is a vital health indicator measuring the number of pregnancy-related deaths per 100,000 live births. It reflects the quality and accessibility of a country's maternal healthcare system. Other indicators like Infant Mortality Rate measure deaths under one year per 1,000 live births, while Life Expectancy estimates the average years a person is expected to live.

28. (A) 1 and 2 only
Community health focuses on the health status of a defined group of people and emphasizes collective action to improve well-being. It utilizes environmental interventions and public health policies rather than focusing solely on individual clinical treatment. This approach addresses the underlying causes of disease within a population, aiming to promote health and prevent illness through community-wide programs and systemic changes.

29. (C) Morbidity Rate – Measure of death in a population
Health indicators are specific metrics used to evaluate the health status of a population. While mortality rates measure the frequency of deaths, morbidity rates measure the frequency of disease or illness within a group. Infant Mortality Rate assesses child survival, and Life Expectancy measures longevity. Misidentifying morbidity as a measure of death confuses the prevalence of sickness with actual mortality.

30. (A) Shift from infectious to chronic/degenerative diseases.
Epidemiological transition describes a shift in the patterns of disease within a population as a country develops. This process involves a move from high rates of infectious and nutritional diseases to a dominance of chronic and degenerative conditions. Improved sanitation, nutrition, and medical care contribute to increased life expectancy, which eventually leads to a higher prevalence of non-communicable diseases.

31. (A) Both A and R are true and R is the correct explanation of A.
The Infant Mortality Rate is a sensitive indicator of a nation's overall socio-economic development and health status. It directly reflects the quality of nutrition, the availability of clean water, and the accessibility of basic healthcare services. High rates often signal underlying systemic issues in public health infrastructure, whereas lower rates suggest successful social policies and effective maternal and child health programs.

32. (D) Average years a newborn lives under current mortality rates.
Life expectancy at birth is a statistical measure representing the average number of years a newborn is expected to live. This calculation is based on the current mortality rates prevailing in a specific population at the time of birth. It serves as a broad indicator of the overall health conditions, living standards, and medical quality available within a specific society.

33. (C) Primary prevention
Primary prevention involves actions taken prior to the onset of disease to remove the possibility that a disease will ever occur. Providing clean drinking water to a community is a classic example of this level of prevention, as it targets the environmental source of infection. By eliminating the risk factor, the community avoids the initial development of diseases like cholera.

34. (B) P-3, Q-2, R-4, S-1
Health transition involves changes in disease patterns and life expectancy over time. Negative health is characterized by the presence of disease or disability. Wellness is an active process of becoming aware of a healthy life, while social health refers to the ability to interact and maintain relationships. These concepts help categorize various states of human well-being and demographic shifts.

35. (C) Quality of interpersonal ties and community involvement.
The social dimension of health focuses on the quality of an individual's interpersonal relationships and their level of community

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involvement. It involves the ability to interact effectively with others and maintain a supportive social network. This dimension recognizes that social ties and community integration are essential components of overall well-being, influencing mental health and providing a sense of belonging.

36. (D) Centralizing healthcare decision-making
The Ottawa Charter outlines five core action areas for health promotion, including building public policy and reorienting health services. These areas emphasize decentralization and community empowerment. Centralizing decision-making contradicts the charter's goal of enabling individuals and communities to take control over the various factors that influence their own health outcomes, as stated in the landmark international health promotion document.

37. (A) 1 and 2 only
Medicalization occurs when the medical profession expands its authority by defining everyday human conditions as medical problems. This shift often leads to treating natural life stages, such as aging or menopause, with pharmaceutical interventions. While it can improve access to care, it also risks over-medicalizing normal experiences, transforming social or physiological transitions into conditions that require clinical management.

38. (B) Statement II is correct, but Statement I is incorrect.
The Right to Health does not guarantee that every individual will be perfectly healthy, as health depends on many biological and personal factors. Instead, it implies a right to a system of health protection that provides equality of opportunity. This includes access to essential healthcare, safe living conditions, and the state's active involvement in preventing and controlling epidemic diseases.

39. (C) Managing external physical, chemical, and biological factors.
Environmental health is a branch of public health focused on the relationship between people and their environment. It involves monitoring and managing external physical, chemical, and biological factors that can potentially affect human health. By controlling pollution, ensuring food safety, and maintaining sanitation, environmental health experts aim to prevent disease and create health-supportive environments for the entire population.

40. (C) A is true but R is false.
Vaccination is a primary prevention strategy because it is administered to healthy individuals to build immunity before they encounter a pathogen. This intervention prevents the initial onset of disease by preparing the immune system to fight specific infections. It is not intended as a treatment for those who are already sick, but rather as a proactive measure to ensure immunity.

41. (B) 1948
The World Health Organization officially established its landmark definition of health in 1948. This definition was groundbreaking as it moved beyond a narrow biological focus to include physical, mental, and social well-being. It remains the most widely cited and influential description of health, shaping public health policies and international healthcare standards for over seven decades across the globe.

42. (B) Ignoring psychological and social variables on health.
A major criticism of the biomedical model is its tendency to ignore the psychological, social, and environmental factors that influence health. By focusing almost exclusively on biological malfunctions and pathogens, it can dehumanize patients by treating them as collections of body parts rather than complex individuals. This narrow approach often misses the broader context of why a person becomes ill.

43. (C) P-3, Q-4, R-2, S-1
Health indicators are measured using specific denominators to reflect population health accurately. The Infant Mortality Rate is calculated per 1,000 live births, while the Maternal Mortality Ratio uses a denominator of 100,000 live births. Life expectancy measures average years lived, and the Crude Death Rate counts total deaths per 1,000 population. These statistics provide vital data for public health.

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44. (D) Sickness
Sickness represents the social dimension of being unwell, specifically focusing on the roles and expectations society places on an individual who is ill. It is a social status that may grant exemptions from normal duties. While disease is biological and illness is subjective, sickness is the external recognition of a person's condition by the community and the legal system.

45. (B) 1 and 3 only
Social determinants of health include broad factors such as income, social status, and access to healthcare services. These elements significantly influence the health outcomes of individuals and communities. Education level and the physical environment also play major, not minor, roles in determining well-being. Addressing these systemic factors is crucial for reducing health inequities and improving overall population health.

46. (B) Emotional Dimension – Ability to recognize and accept one's feelings
The emotional dimension of health involves an individual's ability to recognize, accept, and manage their feelings effectively. It includes maintaining a positive self-image and coping with the various stresses of life. Unlike the physical dimension, which focuses on bodily functions, or the social dimension, which focuses on relationships, the emotional aspect pertains to the internal psychological and affective state.

47. (D) Public sanitation infrastructure
Individual-level determinants of health include personal habits and choices such as hygiene, diet, and physical activity. Public sanitation infrastructure, however, is a societal-level determinant because it is provided by the community or government to benefit the entire population. While individual actions are personal, the development and maintenance of large-scale systems like sewage and water treatment are collective responsibilities.

48. (B) 3—1—2
The epidemiological transition follows a specific historical sequence. It begins with the Age of Pestilence and Famine, characterized by high infectious disease mortality. This is followed by the Age of Receding Pandemics as sanitation and medicine improve. Finally, society enters the Age of Degenerative and Man-made Diseases, where chronic conditions like heart disease and cancer become the leading causes of death.

49. (C) Maintaining homeostasis and withstanding stress.
Positive health goes beyond the mere absence of disease to describe a state of high-level wellness. It is characterized by the body's ability to maintain homeostasis and the psychological resilience to withstand various stressors. This concept implies a reserve of strength and vitality that allows an individual to function at their maximum potential and adapt effectively to life's challenges.

50. (A) Statement I is correct, but Statement II is incorrect.
Reproductive health is a broad concept ensuring that individuals can lead a safe and satisfying sex life with the capability to reproduce and the freedom to decide when to do so. It encompasses the entire life cycle, not just the prevention of maternal mortality. This includes access to family planning, sexual education, and healthcare services for both men and women.

51. (C) Illness
Illness is defined as the subjective experience of an individual who feels unwell. It encompasses personal feelings of pain, discomfort, or fatigue that a patient reports. While a disease is a biological abnormality diagnosed by a physician, illness is the person's unique perception and response to their condition, which can occur even in the absence of a diagnosis.

52. (D) Seeking competent help and cooperating with physicians.
According to the sick role theory, a person who is unwell has certain social duties to fulfill to maintain their status. One of the primary obligations is to seek competent medical help and cooperate fully with physicians to facilitate recovery. This expectation ensures that the individual is actively working toward returning to their normal social and professional responsibilities.

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53. (C) First International Conference on Health Promotion.
The Ottawa Charter for Health Promotion was established during the first International Conference on Health Promotion in 1986. Held in Ottawa, Canada, it provided a framework for empowering individuals and communities to improve their health. The charter shifted the focus from purely curative medical models to a broader strategy involving public policy, supportive environments, and community-based health actions.

54. (B) It is synonymous with practicing a specific organized religion.
The spiritual dimension of health involves a search for meaning, purpose, and a sense of connection to something larger than oneself. While it can be expressed through organized religion, the two are not synonymous. Spiritual health includes personal ethics, values, and self-awareness, and it can exist independently of any specific religious affiliation or participation in formal religious rituals.

55. (D) Tertiary Prevention – Immunization
Prevention levels are categorized by the timing of the intervention. Primary prevention includes activities like health education and immunization to prevent disease onset. Secondary prevention involves screening and early diagnosis to treat conditions early. Tertiary prevention focuses on rehabilitation. Immunization is a primary prevention measure, making its association with tertiary prevention incorrect as it is used before disease occurs.

56. (B) Occupational Health – Ergonomics and workplace safety
Occupational health is specifically concerned with the safety and well-being of people in their workspace. This includes ergonomics, which is the study of people's efficiency in their working environment, and the prevention of workplace injuries. By focusing on the interaction between workers and their environment, occupational health professionals aim to maintain the highest degree of physical and mental health.

57. (A) Health is the absence of disease and infirmity.
A negative view of health defines the concept solely by what is missing, specifically the absence of disease, illness, or infirmity. This perspective treats health as a baseline state achieved when no clinical pathologies are present. In contrast, positive views describe health as a dynamic state of well-being, adaptation, and the ability to lead a socially and economically productive life.

58. (C) Well-being where one copes with stress and realizes potential.
Mental health is a state of well-being in which an individual realizes their own abilities and can cope with the normal stresses of life. It involves the capacity to work productively and make a contribution to one's community. This definition emphasizes functional adaptation and resilience rather than the total absence of negative emotions or an exceptionally high intelligence score.

59. (C) Tertiary prevention
Tertiary prevention is aimed at individuals who have already suffered a significant health event or chronic illness. The goal is to provide rehabilitation to restore function and minimize further disability. Physiotherapy after a stroke is a classic example of this level, as it focuses on helping the patient regain mobility and improve their quality of life after permanent damage.

60. (B) Statement II is correct, but Statement I is incorrect.
The social model of health does not ignore biological factors but emphasizes that health is significantly influenced by broader political, economic, and social determinants. It argues that addressing issues like poverty, housing, and education is just as important as treating individual diseases. This model seeks to understand health within the context of the environment and social structures that people inhabit.

61. (C) 1,00,000 live births
The Maternal Mortality Ratio is a key indicator of maternal health and is calculated using the number of maternal deaths during a specific period. The standard denominator for this ratio is 100,000 live births. This large denominator is used because maternal deaths are relatively rare events compared to the total population, allowing for clearer statistical comparisons between different regions.

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62. (D) Talcott Parsons
Talcott Parsons, a prominent sociologist, introduced the concept of the "Sick Role" in the mid-20th century. He analyzed how society manages illness by defining specific rights and duties for those who are unwell. This theory explains how being sick is treated as a form of social deviance that requires institutionalized roles to ensure the stability of the social system.

63. (C) Enabling people to increase control over their health.
Health promotion is the process of enabling people to increase control over and improve their own health. It involves a wide range of social and environmental interventions designed to benefit and protect individual health and quality of life by addressing the root causes of ill health. It is not limited to clinical treatment but focuses on empowerment and preventive strategies.

64. (D) Spiritual Dimension
The spiritual dimension of health relates to an individual's sense of purpose and their search for meaning in life. It often involves achieving a sense of harmony between the self, the community, and the broader universe. This dimension encompasses personal values, ethics, and the internal peace that comes from understanding one's place within the larger world and existence.

65. (A) It only concerns the health of women and excludes men.
Reproductive health is a state of complete physical, mental, and social well-being in all matters relating to the reproductive system. It is not limited to women but applies to both men and women throughout their lives. This includes access to safe family planning, sexual health services, and the right to information and care for healthy reproductive outcomes for everyone.

66. (B) Holistic Model – Mind, Body, and Spirit integration
The holistic model of health emphasizes the integration of the mind, body, and spirit. It views the individual as a whole system rather than a collection of separate parts. This approach suggests that true health is achieved through a balance of physical wellness, mental stability, and spiritual fulfillment, acknowledging the deep interconnectedness of all aspects of human existence and life.

67. (D) Good social network
The physical dimension of health refers to the biological and physiological state of the body. Key indicators include normal pulse rates, healthy skin, and sound sleep patterns, which reflect efficient organ function. A good social network is a component of the social dimension of health, as it relates to interpersonal relationships and community support rather than bodily integrity or function.

68. (C) Both statements are correct.
Disease is a biological concept referring to a pathological process or physiological dysfunction identified by medical signs. In contrast, sickness is a social concept that describes the role and status society assigns to an individual who is recognized as being unwell. While illness is the personal experience, sickness focuses on the external social recognition and the associated behavioral expectations.

69. (B) It was held in Ottawa, Canada, in 1986.
The Ottawa Charter on Health Promotion was established at the first International Conference on Health Promotion held in Ottawa, Canada, in 1986. This landmark document defined health promotion as the process of enabling people to increase control over their health. It set the stage for modern public health strategies by highlighting the importance of policy, environment, and community action.

70. (B) Secondary prevention
Secondary prevention focuses on the early detection of disease and prompt intervention to prevent progression and complications. Diagnostic tests like Pap smears are examples of screening programs designed to identify conditions in their asymptomatic stages. By detecting issues early, healthcare providers can initiate treatment before the disease becomes advanced, significantly improving patient outcomes and reducing the overall burden of illness.

71. (C) The Health Continuum
The health continuum is a conceptual model that illustrates health as a dynamic and ever-

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changing state. It suggests that health is not a fixed achievement but a spectrum along which individuals move throughout their lives. This model emphasizes that a person's status can shift between wellness and illness depending on various biological, environmental, and lifestyle factors they encounter.

72. (D) The literacy rate of the community
Societal-level determinants of health are broad factors that affect the well-being of entire groups or communities. The literacy rate of a community is a prime example, as it influences access to information, employment opportunities, and the ability to make informed health choices. Unlike biological factors like blood type or metabolic rate, literacy is a social characteristic shaped by community systems.

73. (C) Managing external physical, chemical, and biological factors.
Environmental health focuses on the interaction between human health and the external environment. It involves managing physical, chemical, and biological factors that can influence well-being. This includes monitoring air and water quality, managing waste, and ensuring safe housing and transportation. By controlling these external variables, environmental health professionals aim to prevent disease and create supportive conditions for healthy living.

74. (B) It is only applicable to workers in heavy industries like mining.
Occupational health aims to promote and maintain the highest degree of physical, mental, and social well-being for workers in all occupations. It is not limited to heavy industries like mining but applies to every type of workplace, including offices and service sectors. The focus is on preventing health problems caused by working conditions and protecting workers from various professional risks.

75. (C) IMR – Maternal health indicator
Health indicators are specific metrics used to monitor various aspects of population well-being. While the Maternal Mortality Ratio (MMR) is a primary indicator for maternal health, the Infant Mortality Rate (IMR) is a sensitive indicator used to assess child health and overall community nutrition. Misclassifying IMR as a maternal health indicator overlooks its specific focus on the survival of infants.

76. (D) Turning human problems into medical ones, leading to intervention.
Medicalization can have negative consequences by transforming normal human problems or life stages into medical conditions requiring clinical intervention. This expansion of medical authority can lead to unnecessary treatments and the over-prescription of drugs for natural processes like aging or grief. It may also divert attention away from the underlying social or environmental causes of these issues by individualizing them.

77. (A) Financial well-being
The World Health Organization's 1948 definition of health includes three core dimensions: physical, mental, and social well-being. While financial status can influence an individual's access to healthcare and living conditions, it is not listed as a primary dimension of health in the official WHO definition. Instead, financial factors are considered determinants that affect the three main areas of human well-being.

78. (C) Equilibrium between individual and their total environment.
The holistic model of health views an individual as an integrated system and emphasizes the equilibrium between the person and their total environment. This approach considers physical, mental, and spiritual aspects as interconnected, suggesting that a disturbance in one can affect the others. It promotes health through a balanced lifestyle and environmental harmony rather than just clinical medical treatments.

79. (C) Illness but no disease
Illness refers to a person's subjective experience of feeling unwell, which can occur even when there is no identifiable biological pathology. Disease, however, is the objective biological dysfunction diagnosed by a medical professional. If a person feels symptomatic but clinical tests are normal, they are experiencing illness without a diagnosed disease. This distinction highlights the personal nature of health perceptions.

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80. (B) Statement II is correct, but Statement I is incorrect.
Primary prevention is implemented before a disease occurs to prevent its initial onset. In contrast, tertiary prevention is conducted after a disease has already caused damage, with the goal of rehabilitation and minimizing long-term disability. Statement I is incorrect because prevention when disease is present refers to secondary or tertiary levels. Statement II correctly identifies the rehabilitative focus of tertiary care.

81. (B) Infant Mortality Rate
The Infant Mortality Rate is a specific health indicator defined as the number of deaths of children under one year of age per 1,000 live births. It is widely used to assess the quality of pediatric care and the overall socio-economic conditions of a population. This metric differs from neonatal or under-five mortality rates by focusing specifically on the first year.

82. (B) Fundamental Right that includes the Right to Health.
Article 21 of the Indian Constitution is a Fundamental Right that guarantees the protection of life and personal liberty. The Supreme Court has progressively interpreted this article to include the Right to Health, arguing that the right to life would be meaningless without the essential conditions for a healthy existence. This makes health an enforceable right for all citizens in India.

83. (C) Shift from high infection mortality to low chronic mortality.
Epidemiological transition refers to a long-term shift in the patterns of health and disease within a population. It is characterized by a move from high mortality rates due to infectious diseases and famine to low mortality rates where chronic and degenerative diseases predominate. This transition is usually associated with social and economic development, improved sanitation, and advancements in medical technology.

84. (D) It is the same as the absence of disease.
Positive health is a concept that goes beyond the simple absence of disease. It implies that an individual possesses a reserve of physical and mental strength, enabling them to perform at their peak and experience a sense of vitality. While being disease-free is a component, positive health describes an optimal state of functioning and a proactive sense of overall well-being.

85. (A) Sickness – The social status of the unwell
Sickness is defined as the social state or status of an individual who is recognized by society as being unwell. This status often comes with specific rights, like exemption from work, and duties, such as seeking treatment. While disease is biological and illness is personal, sickness captures the external social identity and roles associated with being in a state of ill health.

86. (B) Dehumanizing patient by focusing only on broken parts.
A frequent criticism of the biomedical model is that it tends to dehumanize patients by focusing almost exclusively on biological malfunctions and specific diseased body parts. By treating the human body like a machine to be repaired, it often overlooks the psychological and social context of the individual. This reductionist approach can lead to a less empathetic and comprehensive care experience.

87. (C) Active, lifelong process of healthy and fulfilling choices.
Wellness is defined as an active, lifelong process of becoming aware of and making conscious choices toward a more healthy and fulfilling life. It is a proactive approach to well-being that involves multiple dimensions, including physical, mental, and social aspects. Unlike a static state of being disease-free, wellness is a dynamic journey of personal growth and optimal health maintenance.

88. (D) Primary prevention
Primary prevention involves measures taken to prevent the initial occurrence of a disease or health problem. A campaign to promote breastfeeding is an example of this level because it aims to provide infants with essential nutrition and immunity, thereby preventing future illnesses. By fostering healthy habits from birth, such programs reduce the risk of later health complications in the population.

89. (C) Mental dimension
The mental dimension of health encompasses an individual's cognitive abilities and psychological

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stability. It includes the capacity to learn from experiences, think logically, and process information effectively. This dimension allows people to manage daily challenges and make sound decisions. A healthy mental state is essential for achieving personal potential and maintaining emotional balance throughout various life events and situations.

90. (C) Both statements are correct.
Health is influenced by both individual and societal determinants. Individual factors include biological characteristics like age and sex, which are unique to each person. Societal determinants encompass the broader context, such as the political and economic systems that shape the environment where people live. Both levels of influence are critical for understanding and improving the overall health outcomes of a population.

91. (B) 1, 2, and 4 only
The Ottawa Charter defines five specific action areas for health promotion: building healthy public policy, creating supportive environments, strengthening community action, developing personal skills, and reorienting health services. These strategies are designed to empower individuals and address the social determinants of health. Privatization is not mentioned as a core action area, as the charter emphasizes public and community-wide collective responsibility.

92. (D) Natural process increasingly treated as a medical emergency.
The medicalization of pregnancy refers to the trend where a natural physiological process is increasingly treated as a medical emergency or a condition requiring constant clinical monitoring and intervention. While medical care has made childbirth safer, this shift can lead to over-intervention in normal pregnancies. It reflects the expansion of medical authority over life events that were previously handled socially or naturally.

93. (C) It is a sensitive indicator of community health and nutrition.
The Infant Mortality Rate is calculated as the number of deaths of infants under one year old per 1,000 live births. It serves as a highly sensitive indicator of a community's overall health status, nutrition, and environmental sanitation. High rates often indicate poor access to healthcare and social inequities, while lower rates reflect successful maternal and child health interventions.

94. (B) State must provide expensive healthcare regardless of cost.
Health as a human right implies that every individual has the right to the highest attainable standard of health and a system of protection. This includes access to safe water, sanitation, and essential care. However, it does not mean the state must provide any treatment regardless of cost. Instead, it focuses on equity, accessibility, and the prevention of epidemic diseases.

95. (D) Social Health – Social isolation.
Social health is characterized by an individual's ability to interact effectively with others and maintain a supportive network of relationships. It involves being integrated into a community and having positive interpersonal ties. Social isolation, which is the lack of these connections, represents a deficit or negative state of social health rather than a defining component of a healthy social dimension.

96. (B) Workplace injuries and chronic illnesses
Poor occupational health practices can lead to significant negative outcomes for both workers and organizations. This includes an increase in workplace injuries and the development of chronic occupational illnesses caused by unsafe conditions or poor ergonomics. These issues not only harm individual well-being but also lead to reduced productivity and higher healthcare costs, highlighting the importance of workplace safety.

97. (A) Pattern change from acute infectious to chronic diseases.
Epidemiological transition is the process by which the pattern of mortality and disease in a population changes. It typically involves a shift from high rates of acute infectious diseases and malnutrition to a dominance of chronic, non-communicable diseases like heart disease and cancer. This transition is usually driven by improvements in public health, medicine, nutrition, and general living standards.

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98. (B) Sick role
When an individual is temporarily excused from their normal social and professional responsibilities due to illness, they are occupying the "sick role." This sociological concept, introduced by Talcott Parsons, describes the rights and obligations of the unwell. Society grants this exemption to allow the person to focus on recovery, provided they seek medical help and cooperate with treatment.

99. (C) General health throughout the life cycle
Reproductive health is a comprehensive state of well-being that relates to the reproductive system and its functions. It is not limited to maternal health or women's health but is a component of general health that applies to all individuals throughout their entire life cycle. This includes access to education, family planning, and services for sexual health and safe reproduction.

100. (D) Illustrates that health status is always moving and dynamic.
The health continuum model illustrates that an individual's health status is not a static or fixed achievement. Instead, it is a dynamic state that is constantly moving along a spectrum ranging from optimum wellness to premature death. This perspective emphasizes that health requires continuous effort and adaptation to biological, lifestyle, and environmental factors encountered throughout a person's life journey.

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CHAPTER 02

Theoretical Perspectives on Health

1. According to the functionalist perspective, what is the primary social function of the healthcare system?
(A) Maximizing financial profits for large pharmaceutical firms
(B) Restoring health to maintain general social stability
(C) Monitoring and surveying the bodies of individual citizens
(D) Controlling female reproduction through patriarchal systems

2. Which sociologist introduced the concept of the "sick role" as a specialized social role for those with illness?
(A) Talcott Parsons
(B) Karl Marx
(C) Michel Foucault
(D) Erving Goffman

3. Under the functionalist framework, which of the following is considered a "right" of a sick person?
(A) The right to remain ill as long as they choose
(B) The right to refuse all forms of medical intervention
(C) Exemption from normal social role responsibilities
(D) Exemption from the duty to seek professional help

4. Which of the following is NOT an obligation of the sick person according to the functionalist "sick role" model?
(A) Defining the state of being sick as undesirable
(B) Seeking technically competent help
(C) Cooperating with the practitioner in the process of getting well
(D) Minimizing the cost of medical treatment for the state

5. Consider the following statements regarding the functionalist view of the sick role:
1. Illness is seen as a form of social deviance that needs to be managed.
2. The sick role is a temporary, institutionalized role.
3. The relationship between doctor and patient is inherently hierarchical.

Which of the above statement(s) is/are correct?
(A) 1 and 2 only
(B) 2 and 3 only
(C) 1 and 3 only
(D) 1, 2, and 3

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6. Read the following statements and select the correct option:
Statement I: The sick role model assumes that the patient has a desire to get well.
Statement II: Critics argue that the sick role model is better suited for chronic conditions rather than acute illnesses.
(A) Statement I is correct, but Statement II is incorrect.
(B) Statement I is incorrect, but Statement II is correct.
(C) Both Statement I and Statement II are correct.
(D) Both Statement I and Statement II are incorrect.

7. Which of the following pairs is INCORRECTLY matched regarding theoretical perspectives on health?
(A) Functionalism – Social Stability
(B) Conflict Theory – Health as a Commodity
(C) Interactionism – Labeling Theory
(D) Postmodernism – The Sick Role

8. Identify the correct sequence of the following steps in the sick role process as theorized by Parsons:
1. Exemption from normal duties
2. Recognition of illness as undesirable
3. Seeking professional medical advice
4. Cooperation with the treatment plan

(A) 1-2-3-4
(B) 2-1-3-4
(C) 1-3-2-4
(D) 2-3-1-4

9. Which concept describes the conflict perspective's view that healthcare is primarily a business designed to generate wealth?
(A) The medicalization of life
(B) Systematic clinical iatrogenesis
(C) Health as a market commodity
(D) The negotiated social order

10. Analyze the following assertion and reason, then select the correct option:
Assertion (A): From a conflict perspective, medicalization acts as a form of social control.
Reason (R): Medicine defines behaviors that challenge the social order as "illnesses" to be managed by experts.
(A) Both A and R are true and R is the correct explanation of A.
(B) Both A and R are true but R is not the correct explanation of A.
(C) A is true but R is false.
(D) A is false but R is true.

11. According to the Marxist view, what is the primary cause of health inequalities in society?
(A) Inherent biological differences between social classes
(B) Lack of individual responsibility for lifestyle choices
(C) Disparities in educational attainment and geography
(D) Unequal distribution of resources under capitalism

12. Which of the following best describes the conflict view on the pharmaceutical industry?
(A) It operates as a benevolent entity seeking to eradicate disease
(B) It prioritizes profitable chronic drugs over rare conditions
(C) It focuses on life-saving research over any profit motives
(D) It acts as an egalitarian system for medical drug access

13. A conflict theorist analyzing the high cost of insulin would likely focus on which of the following?
(A) The biological necessity of the hormone for survival
(B) The interaction between the doctor and the patient
(C) Profit-maximization by corporate healthcare providers
(D) The patient's failure to adhere to a healthy diet

14. What term did Ivan Illich use to describe the process where medical intervention causes more harm than good?
(A) Medicalization
(B) Clinical Gaze
(C) Stigmatization
(D) Iatrogenesis

15. Match the items in List I with those in List II and select the correct option:
List I: Type of Iatrogenesis
P. Clinical Iatrogenesis
Q. Social Iatrogenesis
R. Cultural Iatrogenesis
List II: Description
1. Destruction of traditional ways of dealing with suffering
2. Medicalization of life stages like birth and death
3. Direct harm caused by medical treatment or drugs
(A) P-3, Q-2, R-1
(B) P-1, Q-2, R-3
(C) P-2, Q-3, R-1
(D) P-3, Q-1, R-2

16. Read the following statements and select the correct option:
Statement I: Social iatrogenesis refers to the way medicine expands its jurisdiction into all areas of human life.
Statement II: Clinical iatrogenesis refers to the psychological trauma of being diagnosed with a terminal illness.
(A) Statement I is correct, but Statement II is incorrect.
(B) Statement I is incorrect, but Statement II is correct.
(C) Both Statement I and Statement II are

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correct.
(D) Both Statement I and Statement II are incorrect.

17. Which of the following statements about Ivan Illich's theory is INCORRECT?
(A) Medical progress is viewed as a threat to human autonomy.
(B) Clinical iatrogenesis refers only to unintentional surgical errors.
(C) Cultural iatrogenesis makes people less able to cope with pain naturally.
(D) Medicine can become a major health hazard in modern society.

18. Which type of iatrogenesis, according to Illich, involves the loss of the individual's ability to manage their own health?
(A) Cultural
(B) Clinical
(C) Social
(D) Biological

19. Which theoretical perspective focuses on the meanings individuals attach to their symptoms and the social experience of illness?
(A) The macro-functionalist perspective
(B) The structural conflict perspective
(C) The symbolic interactionist approach
(D) The postmodern cultural perspective

20. Consider the following statements regarding Labeling Theory in health:
1. No act or condition is inherently deviant until it is labeled so.
2. Labels can affect how an individual is treated by medical professionals.
3. Once labeled, a person may adopt a "sick identity" that influences their behavior.

Which of the above statement(s) is/are correct?
(A) 1 and 2 only
(B) 2 and 3 only
(C) 1 and 3 only
(D) 1, 2, and 3

21. Erving Goffman's concept of "stigma" in health refers to:
(A) Physical pain associated with various diseases
(B) Professional prestige held by medical doctors
(C) A deeply discrediting attribute of a person
(D) Biological markers identifying specific viruses

22. What does Erving Goffman mean by the term "spoiled identity"?
(A) A person receiving excessive medical attention
(B) Damage to self-image due to a social stigma
(C) Loss of medical records in a hospital system
(D) The refusal of patients to follow medical advice

23. Analyze the following assertion and reason, then select the correct option:
Assertion (A): In the interactionist view, a diagnosis is often a "negotiated" outcome.
Reason (R): Doctors and patients bring different meanings and agendas to the clinical encounter.
(A) Both A and R are true and R is the correct explanation of A.
(B) Both A and R are true but R is not the correct explanation of A.
(C) A is true but R is false.
(D) A is false but R is true.

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24. Which of the following is an example of the "negotiation of diagnosis"?
(A) Labeling fatigue as depression rather than laziness
(B) Performing blood tests to confirm clinical anemia
(C) Setting the price of a drug by a pharmaceutical firm
(D) Mandating vaccinations through government policy

25. Which of the following is NOT typically associated with the self-fulfilling prophecy in a health context?
(A) A patient recovering faster because they believe in the treatment
(B) A student performing poorly because a doctor labeled them "learning disabled"
(C) A surgeon successfully removing a tumor through technical skill
(D) A person becoming more ill because they were told their condition is terminal

26. The feminist perspective on health primarily criticizes:

(A) Patriarchal control of medical knowledge and practice
(B) The lack of modern technology in urban hospital centers
(C) High costs of medical insurance for male policy holders
(D) The functionalist emphasis on achieving social stability

27. Match the items in List I with those in List II and select the correct option:
List I: Perspective
P. Feminist Perspective
Q. Social Constructionism
R. Postmodernism
List II: Core Concept
1. Medical Gaze
2. Medicalization of menopause
3. Mental illness as a myth
(A) P-1, Q-2, R-3
(B) P-3, Q-1, R-2
(C) P-2, Q-1, R-3
(D) P-2, Q-3, R-1

28. Which of the following pairs is INCORRECTLY matched?
(A) Patriarchy – Male dominance in medical professions
(B) Feminist view – Women's health is purely biological
(C) Medicalization – Defining childbirth as a medical emergency
(D) Gynocide – Systematic neglect of women's health needs

29. Read the following statements and select the correct option:
Statement I: Feminists argue that the medicalization of menopause turns a natural life transition into a hormone-deficiency disease.
Statement II: The medicalization of childbirth has historically increased the autonomy of women during labor.
(A) Statement I is correct, but Statement II is incorrect.
(B) Statement I is incorrect, but Statement II is correct.
(C) Both Statement I and Statement II are correct.
(D) Both Statement I and Statement II are incorrect.

30. Consider the following statements regarding the Social Constructionist view:
1. Disease is a biological reality, while illness is the social experience of that reality.
2. The definitions of health and illness change across different cultures and historical periods.
3. Medical knowledge is not objective truth but is shaped by social factors.
Which of the above statement(s) is/are correct?
(A) 1 and 2 only
(B) 2 and 3 only
(C) 1 and 3 only
(D) 1, 2, and 3

31. How does social constructionism define "disease"?
(A) An objective biological condition found in science
(B) A subjective and personal feeling of being unwell
(C) A social label applied to non-conformist behavior
(D) A myth created by the pharmaceutical industry

32. Which psychiatrist argued in "The Myth of Mental Illness" that mental illness is a social construction used to control behavior?
(A) Sigmund Freud
(B) Thomas Szasz
(C) Ivan Illich
(D) Michel Foucault

33. Which of the following statements about the "medical model" of disability is INCORRECT?
(A) It views disability as a physical bodily impairment
(B) It focuses on social barriers and accessibility
(C) It focuses on "curing" or "fixing" the individual
(D) It places the doctor as the primary authority

34. Analyze the following assertion and reason, then select the correct option:
Assertion (A): The social model of disability distinguishes between "impairment" and "disability."
Reason (R): Disability is caused by the way society is organized rather than by a person's physical limitations.

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(A) Both A and R are true and R is the correct explanation of A.
(B) Both A and R are true but R is not the correct explanation of A.
(C) A is true but R is false.
(D) A is false but R is true.

35. Which perspective focuses on how language, power, and "discourse" shape our understanding of the human body?
(A) Functionalism
(B) Marxism
(C) Postmodernism
(D) Interactionism

36. According to Michel Foucault, the "medical gaze" refers to:
(A) The kind eyes of a compassionate physician
(B) The use of microscopes in modern pathology
(C) The patient's view of the medical establishment
(D) Viewing patients as collections of symptoms

37. What is the central theme of Michel Foucault's work regarding health?
(A) Economic exploitation of the patient classes
(B) Biological evolution of specific viral diseases
(C) Intersections of knowledge, power, and control
(D) Efficiency of the sick role in modern society

38. Which of the following pairs is correctly matched?
(A) Parsons – Iatrogenesis
(B) Foucault – The Medical Gaze
(C) Marx – Stigma
(D) Goffman – Commodity

39. Match the items in List I with those in List II and select the correct option:
List I: Author
P. Erving Goffman
Q. Talcott Parsons
R. Ivan Illich
S. Michel Foucault
List II: Key Work/Concept
1. Stigma
2. Medical Gaze
3. Sick Role
4. Medical Nemesis
(A) P-3, Q-1, R-2, S-4
(B) P-1, Q-2, R-3, S-4
(C) P-4, Q-3, R-1, S-2
(D) P-1, Q-3, R-4, S-2

40. Read the following statements and select the correct option:
Statement I: Functionalists see the doctor-patient relationship as harmonious and necessary for social order.
Statement II: Conflict theorists see the doctor-patient relationship as characterized by power imbalance and exploitation.
(A) Statement I is correct, but Statement II is incorrect.
(B) Statement I is incorrect, but Statement II is correct.
(C) Both Statement I and Statement II are correct.
(D) Both Statement I and Statement II are incorrect.

41. In the "sick role" framework, what does "technically competent help" usually refer to?
(A) Various forms of self-medication
(B) Specialized religious healing rituals
(C) Licensed medical practitioners
(D) Care provided by family members

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42. Consider the following statements regarding the obligations of the sick role according to Talcott Parsons:
1. The sick person must want to get healthy.
2. The sick person must seek professional advice.
3. The sick person must pay for their own treatment.
Which of the above statement(s) is/are correct?
(A) 1 and 2 only
(B) 2 and 3 only
(C) 1 and 3 only
(D) 1, 2, and 3

43. Which of the following is NOT a criticism of the functionalist view of health?
(A) It ignores the influence of social class on health.
(B) It assumes that all people have equal access to the sick role.
(C) It ignores the conflict between doctors and patients.
(D) It focuses too much on the patient's

individual biology.

44. Which statement would Erving Goffman most likely agree with?
(A) Doctors maintain social equilibrium through status
(B) Chronically ill patients manage spoiled identities
(C) Illness is a biological defect cured by science
(D) Capitalism causes all modern mental health issues

45. Analyze the following assertion and reason, then select the correct option:
Assertion (A): Medicalization can lead to the "depoliticization" of social problems.
Reason (R): By framing poverty-related stress as a chemical imbalance, the need for social reform is ignored.
(A) Both A and R are true and R is the correct explanation of A.
(B) Both A and R are true but R is not the correct explanation of A.
(C) A is true but R is false.
(D) A is false but R is true.

46. What is the definition of "Clinical Iatrogenesis"?
(A) Illness caused by systemic social stress
(B) Medicalization of natural life cycles
(C) Loss of traditional healing knowledge
(D) Harm caused by medical intervention

47. The concept that medical experts now define what is "normal" and "abnormal" in behavior is known as:
(A) Medicalization
(B) Socialization
(C) Rationalization
(D) Secularization

48. Which of the following pairs is INCORRECTLY matched regarding theoretical focus?
(A) Interactionism – Micro-level meanings
(B) Postmodernism – Universal objective truths
(C) Marxism – Macro-level economic structures
(D) Functionalism – System maintenance

49. Match the items in List I with those in List II and select the correct option:
List I: Condition
P. Disclosing an illness to a partner
Q. Being treated differently after a diagnosis
R. Accepting the doctor's definition of symptoms
List II: Interactionist Concept
1. Labeling
2. Negotiated Diagnosis
3. Information Management
(A) P-1, Q-2, R-3
(B) P-3, Q-1, R-2
(C) P-2, Q-3, R-1
(D) P-3, Q-2, R-1

50. Identify the correct sequence of the following historical shifts in medical perception as described by Michel Foucault:
1. Medicine of species (Classifying diseases)
2. Medicine of spaces (Disease in the social body)
3. The Birth of the Clinic (Focus on the individual body)
(A) 1-2-3
(B) 2-1-3
(C) 1-3-2
(D) 3-2-1

51. According to Thomas Szasz, what are most "mental illnesses"?
(A) Significant chemical imbalances in the brain
(B) Inherited genetic mutations and flaws
(C) Problems in living and social deviations
(D) Requirements of the social functional system

52. Why do many feminists criticize the medicalization of childbirth?
(A) It makes birth too expensive for the poor
(B) It reduces the number of healthy babies
(C) It encourages women to stay at home more
(D) It shifts control to male-dominated medicine

53. Read the following statements and select the correct option:
Statement I: Marxist sociologists argue that the health of the workforce is maintained only to ensure the continued accumulation of capital.
Statement II: The pharmaceutical industry prioritizes "orphan drugs" for rare diseases because they are most needed.
(A) Statement I is correct, but Statement II is incorrect.

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(B) Statement I is incorrect, but Statement II is correct.
(C) Both Statement I and Statement II are correct.
(D) Both Statement I and Statement II are incorrect.

54. Which feature is NOT part of the original four features of the sick role as defined by Talcott Parsons?
(A) The person is not responsible for their condition.
(B) The person must pay for their medical consultations.
(C) The person is exempt from normal social duties.
(D) The person must seek competent technical help.

55. Consider the following types of doctor-patient interactions:
1. Mutual participation (Chronic illness management)
2. Guidance-cooperation (Acute infections)
3. Activity-passivity (Emergency surgery)
Which of the above statement(s) is/are recognized in interactionist studies of medical encounters?
(A) 1 and 2 only
(B) 2 and 3 only
(C) 1 and 3 only
(D) 1, 2, and 3

56. In the conflict perspective, the "medical-industrial complex" refers to:
(A) Alliances of doctors, firms, and insurers
(B) Networks of rural hospitals and clinics
(C) Educational systems for medical students
(D) The central government health department

57. Which of the following statements about Postmodernism and health is INCORRECT?
(A) There is no single "truth" in medicine, only different discourses.
(B) The body is seen as a site of surveillance and control.
(C) Science is always purely objective and free from social influence.
(D) Modern medicine is a "grand narrative" that is being questioned.

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58. Analyze the following assertion and reason, then select the correct option:
Assertion (A): Chronic illness often leads to a "biographical disruption."
Reason (R): It forces individuals to re-evaluate their identity and future plans due to physical limitations.
(A) Both A and R are true and R is the correct explanation of A.
(B) Both A and R are true but R is not the correct explanation of A.
(C) A is true but R is false.
(D) A is false but R is true.

59. Which of the following is a correct statement regarding "Cultural Iatrogenesis"?
(A) Physical side effects resulting from chemotherapy
(B) The process by which doctors become celebrities
(C) Spread of disease through cultural interaction
(D) Destroying the ability to suffer meaningfully

60. Match the items in List I with those in List II and select the correct option:
List I: Model of Disability
P. Medical Model
Q. Social Model
List II: Core Focus
1. Removal of environmental barriers
2. Rehabilitation of the individual
3. Political activism for rights
4. Surgical intervention
(A) P-1, 3; Q-2, 4
(B) P-2, 4; Q-1, 3
(C) P-1, 2; Q-3, 4
(D) P-3, 4; Q-1, 2

61. Ivan Illich's work "Medical Nemesis" is primarily a critique of:
(A) The lack of doctors in developing nations
(B) The high cost of medical school
(C) The counter-productivity of modern medicine
(D) The use of alternative medicine

62. "Social Iatrogenesis" is best defined as:
(A) Physical injuries occurring during complex surgeries
(B) Refusal of society to provide free universal

care
(C) Psychological impacts of a terminal medical diagnosis
(D) Expansion of the medical domain into everyday life

63. Which of the following is a correct assumption of the functionalist perspective on health?
(A) Healthcare systems contribute to social integration
(B) Health is a personal lifestyle and wellness choice
(C) Doctors use power to exploit the lower working class
(D) The definition of health is purely personal and subjective

64. Which of the following pairs is INCORRECTLY matched?
(A) Szasz – Mental illness as a social construction
(B) Parsons – Conflict Perspective
(C) Foucault – Power/Knowledge
(D) Illich – Iatrogenesis

65. Which of the following is a major criticism of applying the "sick role" to chronic illness?
(A) Chronic patients are never exempt from social duties
(B) Chronic patients cannot fulfill the duty to get well
(C) Doctors refuse to treat people with chronic illness
(D) Chronic illness is not considered a medical condition

66. Read the following statements and select the correct option:
Statement I: Interactionists believe that doctors "label" patients, which can lead to a self-fulfilling prophecy.
Statement II: Functionalists believe that labels are necessary to categorize and treat diseases efficiently.
(A) Statement I is correct, but Statement II is incorrect.
(B) Statement I is incorrect, but Statement II is correct.
(C) Both Statement I and Statement II are correct.
(D) Both Statement I and Statement II are incorrect.

67. Which of the following is NOT a focus of the feminist perspective on women's health?
(A) The medicalization of pregnancy
(B) The lack of women in senior surgical positions
(C) The biological superiority of women's immune systems
(D) The historical diagnosis of "hysteria" to control women

68. When a patient and doctor disagree on a diagnosis and eventually reach a compromise, this is an example of:
(A) Clinical Iatrogenesis
(B) Structural Functionalism
(C) Medical Hegemony
(D) Negotiated Order

69. According to Thomas Szasz, labeling someone as "mentally ill" is primarily a way to:
(A) Provide the highest possible standard of medical care
(B) Resolve the underlying biological issues in the brain
(C) Control those who exhibit non-conformist behavior
(D) Ensure individuals receive necessary government aid

70. Which sociologist is most associated with the study of "Total Institutions," such as asylums, and their impact on identity?
(A) Talcott Parsons
(B) Erving Goffman
(C) Karl Marx
(D) Ivan Illich

71. Which of the following statements about Foucault's concept of the "Medical Gaze" is INCORRECT?
(A) It emerged with the development of clinical anatomy.
(B) It separates the patient's body from their personhood.
(C) It is a manifestation of institutional power.
(D) It views the patient as a unique person with a story.

72. What does the term "spoiled identity" imply for a person with a visible disability?
(A) Disability dominates their social identity

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(B) They receive special social status privileges
(C) They have been cured by medical science
(D) They are exempt from all social obligations

73. Which of the following pairs is correctly matched from a conflict perspective?
(A) Pharmaceutical Industry – Philanthropy
(B) Health – A right for everyone regardless of cost
(C) Medicine – An instrument of social control
(D) Doctors – Equal partners with patients

74. Which of the following is a "right" in the sick role framework?
(A) Right to not be blamed for the illness
(B) Right to be taken care of by the state
(C) Right to choose any medication they want
(D) Right to continue working while sick

75. According to Ivan Illich, which type of iatrogenesis involves the "medicalization of death"?
(A) Clinical
(B) Cultural
(C) Professional
(D) Social

76. Read the following statements and select the correct option:
Statement I: The "medical gaze" allows doctors to see hidden truths within the body through technology.
Statement II: Michel Foucault argues that this gaze also subjects the body to increased surveillance.
(A) Statement I is correct, but Statement II is incorrect.
(B) Statement I is incorrect, but Statement II is correct.
(C) Both Statement I and Statement II are correct.
(D) Both Statement I and Statement II are incorrect.

77. Which of the following is NOT an assumption of the functionalist perspective on health?
(A) The healthcare system is part of the social structure.
(B) Illness is a threat to the smooth running of society.
(C) The doctor-patient relationship is based on a power struggle.
(D) Professional medical knowledge is essential for social health.

78. Which statement is correct regarding Erving Goffman's view of stigma?
(A) Stigma is always a physical deformity.
(B) Stigma only applies to mental illness.
(C) Stigma is beneficial for the sick person's recovery.
(D) Stigma is a social process of devaluation.

79. The interactionist focus on "negotiation" in a hospital setting suggests that:
(A) Staff and patients engage in informal bargaining
(B) Rules are fixed and never subject to social change
(C) Doctors always have final say without patient talk
(D) Insurance companies determine every single outcome

80. Which of the following pairs is INCORRECTLY matched?
(A) Goffman – Impression Management
(B) Szasz – The Medical Model of Disability
(C) Illich – Deschooling Society
(D) Parsons – The Sick Role

81. Why is the social model of disability often preferred by disability activists?
(A) It guarantees a biological cure for all impairments
(B) It focuses on societal barriers rather than defects
(C) It grants more authority to practicing medical doctors
(D) It removes the need for any form of medical treatment

82. The process of defining a non-medical problem as an illness or medical disorder is:
(A) Medicalization
(B) Sanitization
(C) Hospitalization
(D) Professionalization

83. Which of the following is a correct statement regarding the symbolic interactionist view of chronic illness?

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(A) It is purely a biological and physiological event
(B) It is a functional requirement for social balance
(C) It involves a loss of self and identity struggle
(D) It is an economic commodity traded by the state

84. Which of the following is NOT one of the types of iatrogenesis identified by Ivan Illich?
(A) Clinical
(B) Social
(C) Cultural
(D) Psychological

85. According to the sick role model, the obligation to "seek technically competent help" implies that:
(A) The patient should consult a priest for healing
(B) The patient should rely on peer internet forums
(C) The patient must defer to a trained physician
(D) The patient must perform surgery on themselves

86. Read the following statements and select the correct option:
Statement I: Capitalism encourages the development of "lifestyle drugs" for the wealthy rather than vaccines for tropical diseases.
Statement II: This is a core argument of the functionalist perspective on health.
(A) Statement I is correct, but Statement II is incorrect.
(B) Statement I is incorrect, but Statement II is correct.
(C) Both Statement I and Statement II are correct.
(D) Both Statement I and Statement II are incorrect.

87. Which of the following statements about Thomas Szasz is INCORRECT?
(A) He believed that "mental illness" is a metaphor.
(B) He argued that psychiatry is a form of social control.
(C) He believed individuals should be responsible for their own behavior.
(D) He supported involuntary commitment for all depressed persons.

88. Which of the following pairs is correctly matched from a feminist perspective?
(A) Menopause – A natural life stage
(B) Childbirth – A high-risk surgical event by default
(C) Male doctors – Always neutral and objective
(D) Female patients – Primary decision-makers in historical medicine

89. In the context of medicine, what does Michel Foucault mean by "power"?
(A) The ability of a doctor to charge high fees
(B) The physical strength of a nurse
(C) The ability to define truth regarding the body
(D) The legal right to build state-owned hospitals

90. In the sick role framework, why is "wanting to get well" considered an obligation?
(A) Returning individuals to productive social roles
(B) Saving the government money on healthcare costs
(C) Pleasing the physician during the clinical visit
(D) Avoiding the social stigma of being labeled sick

91. Stigma that is not immediately visible, such as a history of mental illness, is referred to by Erving Goffman as:
(A) Discredited stigma
(B) Spoiled stigma
(C) Hidden iatrogenesis
(D) Discreditable stigma

92. Which of the following is a correct statement from a conflict perspective?
(A) Doctors are altruistic servants of the community.
(B) Status is maintained by restricting medical knowledge.
(C) Health is distributed equally in capitalist societies.
(D) Medicalization is always beneficial for the patient.

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93. Which of the following is NOT a core assumption of symbolic interactionism in health?
(A) Health and illness are socially constructed meanings.
(B) The focus is on the micro-level of human interaction.
(C) Economic structures determine the health of the population.
(D) People act toward things based on the meanings they have for them.

94. Read the following statements and select the correct option:
Statement I: Postmodernists argue that the "body" is a project that individuals constantly work on.
Statement II: This view rejects the idea of a single, universal medical truth.
(A) Statement I is correct, but Statement II is incorrect.
(B) Statement I is incorrect, but Statement II is correct.
(C) Both Statement I and Statement II are correct.
(D) Both Statement I and Statement II are incorrect.

95. Which of the following pairs is INCORRECTLY matched?
(A) Interactionism – Focus on pharmaceutical profit
(B) Social model of disability – Focus on societal barriers
(C) Medical model of disability – Focus on impairment
(D) Postmodernism – Focus on the medical gaze

96. When a doctor tells a patient they will never walk again, and the patient stops trying, resulting in muscle atrophy, this is an example of:
(A) Standard clinical iatrogenesis
(B) The self-fulfilling prophecy
(C) Functionalist social balance
(D) The negotiated social order

97. According to Ivan Illich, medical systems become "counter-productive" when:
(A) They become too cheap.
(B) They produce more illness than they cure.
(C) They are run by the government.
(D) They use traditional herbs.

98. Erving Goffman's concept of a "Total Institution" refers to places like asylums where:
(A) All life is conducted under a single authority
(B) Patients maintain total freedom and autonomy
(C) Doctors and patients hold equal social power
(D) No formal rules or regulations govern behavior

99. Which of the following is NOT a Marxist critique of health?
(A) Medicine serves the interests of the ruling class.
(B) Health is commodified for profit.
(C) The sick role is a necessary way to maintain social harmony.
(D) Capitalism creates occupational hazards for the working class.

100. The "sick role" is best defined as:
(A) Inherent biological states of the human body
(B) Personal psychological defense mechanisms
(C) Legal statuses granted by the modern state
(D) Social expectations for those who are ill

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ANSWERS

1. (B) Restoring health to maintain general social stability
Functionalists argue that society is a complex system requiring all parts to work together for stability. Illness is viewed as a form of social dysfunction because sick individuals cannot fulfill their productive roles. Therefore, the healthcare system functions as a mechanism of social control, restoring individuals to health to ensure continued social order and system maintenance.

2. (A) Talcott Parsons
Talcott Parsons developed the concept of the sick role within the framework of structural functionalism. He viewed illness as a form of social deviance that requires institutionalized management. This perspective provides a set of rights and obligations for the sick individual, ensuring that illness does not permanently disrupt the functioning and stability of the broader social system.

3. (C) Exemption from normal social role responsibilities
According to the functionalist perspective, sick individuals are granted specific social privileges to help them recover. One primary right is the temporary exemption from normal social obligations, such as work or household duties. This exemption is socially sanctioned but conditional, as the individual is expected to demonstrate a genuine desire to recover and return to their social roles.

4. (D) Minimizing the cost of medical treatment for the state
The traditional sick role model focuses on the social management of illness rather than the economic costs to the state. Parsons identified specific obligations, such as viewing illness as undesirable and seeking professional medical help. While modern healthcare systems often emphasize cost-efficiency, these economic considerations were not a component of the original sociological formulation of the sick role.

5. (D) 1, 2, and 3
Structural functionalism characterizes illness as a dysfunctional state that disrupts social equilibrium. To manage this deviance, the sick role functions as a temporary, institutionalized status with specific norms. Within this framework, the relationship between medical professionals and patients is inherently hierarchical, as doctors possess the specialized knowledge and authority required to legitimize and treat the patient's condition.

6. (A) Statement I is correct, but Statement II is incorrect.
The sick role model assumes that patients have a normative obligation to desire recovery. However, critics argue that this framework is primarily designed for acute, temporary illnesses rather than chronic conditions. In chronic illness, the expectation to get well is often unrealistic, making the traditional model less applicable to the long-term management of permanent health challenges and disabilities.

7. (D) Postmodernism – The Sick Role
The sick role is a foundational concept in structural functionalism, emphasizing how social systems manage illness to maintain stability. In contrast, postmodernism focuses on the deconstruction of grand narratives and the role of language and discourse in shaping medical knowledge. Therefore, linking postmodernism directly to the traditional sick role represents a conceptual mismatch in the sociology of health.

8. (D) 2-3-1-4
The process of adopting the sick role begins with the individual recognizing their illness as an undesirable state. Subsequently, they seek professional medical advice to legitimize their condition. Once the diagnosis is confirmed, the individual is officially exempted from normal social duties. Finally, they must cooperate with the prescribed treatment plan to ensure a swift return to health.

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9. (C) Health as a market commodity
Conflict theorists argue that healthcare in capitalist societies is often treated as a commodity rather than a basic human right. This perspective highlights how medical services and pharmaceuticals are distributed based on the ability to pay, prioritizing corporate profit over public well-being. Consequently, health outcomes are frequently determined by socio-economic status rather than medical necessity or equity.

10. (A) Both A and R are true and R is the correct explanation of A.
Medicalization involves the expansion of medical authority into areas of life previously considered non-medical. From a conflict perspective, this process acts as social control by defining deviant or challenging behaviors as illnesses. By labeling social problems as individual medical conditions, the system effectively manages and neutralizes potential threats to the status quo through expert-led interventions rather than social reform.

11. (D) Unequal distribution of resources under capitalism
Marxist sociology posits that health inequalities are fundamentally rooted in the structure of capitalism. The unequal distribution of wealth and resources leads to disparate living and working conditions among social classes. These structural inequities result in poorer health outcomes for the proletariat, who face greater environmental hazards and limited access to nutritious food and high-quality medical services compared to the bourgeoisie.

12. (B) It prioritizes profitable chronic drugs over rare conditions
The conflict perspective highlights the profit-driven nature of the pharmaceutical industry within a capitalist framework. Companies often prioritize the development of medications for chronic conditions that require long-term use, as these provide more consistent revenue streams. Conversely, research into rare diseases or preventive vaccines for low-income populations is frequently neglected because it offers lower financial returns for corporate stakeholders.

13. (C) Profit-maximization by corporate healthcare providers
A conflict theorist examining high insulin costs would focus on how corporations exploit essential life-saving medications for financial gain. This analysis centers on the power dynamics between pharmaceutical companies and vulnerable patients. The emphasis is on how capitalist structures prioritize the accumulation of wealth over the health needs of the population, leading to significant barriers to accessing necessary medical treatments.

14. (D) Iatrogenesis
Ivan Illich introduced the concept of iatrogenesis to describe how modern medical systems can inadvertently cause harm to individuals and society. He argued that the expansion of medical authority often results in clinical, social, and cultural damage. This perspective suggests that excessive medical intervention can undermine human autonomy and the ability of individuals to cope with illness and suffering naturally.

15. (A) P-3, Q-2, R-1
Clinical iatrogenesis involves direct physical harm caused by medical treatments or medications. Social iatrogenesis occurs when medicine expands its jurisdiction into life stages like birth and death, making people dependent on professional management. Cultural iatrogenesis refers to the destruction of traditional coping mechanisms for suffering. Together, these concepts illustrate how medical dominance can negatively impact individual health and social autonomy.

16. (A) Statement I is correct, but Statement II is incorrect.
Social iatrogenesis describes the process where medical authority increasingly governs various aspects of daily life, transforming natural experiences into medical conditions. However, clinical iatrogenesis specifically refers to the physical harm or illnesses caused directly by medical treatments, drugs, or hospital environments. It is not defined by the psychological trauma of a diagnosis, which is more accurately associated with labeling and stigma.

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17. (B) Clinical iatrogenesis refers only to unintentional surgical errors.
Clinical iatrogenesis encompasses a wide range of medical harms beyond just surgical mistakes. It includes adverse drug reactions, hospital-acquired infections, and the negative side effects of various treatments. Illich's critique is broader, suggesting that the medical system itself becomes a major health hazard when its interventions produce more illness and suffering than they actually alleviate in the general population.

18. (A) Cultural
Cultural iatrogenesis occurs when the medical establishment erodes the ability of individuals to manage their own health, pain, and suffering. By medicalizing every aspect of the human experience, traditional and personal ways of coping are replaced by a total dependence on professional intervention. This leads to a loss of autonomy, where people feel unable to handle life's challenges without medical assistance.

19. (C) The symbolic interactionist approach
The symbolic interactionist perspective focuses on the micro-level meanings and subjective experiences individuals associate with health and illness. It explores how people interpret their symptoms and how these interpretations influence their social interactions and self-identity. This approach emphasizes that illness is not just a biological event but a social process shaped by personal narratives and the reactions of others in society.

20. (D) 1, 2, and 3
Labeling theory posits that health conditions are socially defined rather than inherently deviant. Once a medical label is applied, it significantly influences how professionals and society treat the individual. Furthermore, the person may internalize this label, adopting a sick identity that alters their behavior and self-perception. This process illustrates how social reactions to illness can shape the patient's long-term experience.

21. (C) A deeply discrediting attribute of a person
Erving Goffman defined stigma as an attribute that is deeply discrediting, reducing an individual from a whole person to a tainted or discounted one. In the context of health, stigma can arise from visible physical impairments or hidden mental illnesses. This social devaluation affects how individuals are perceived and treated, often leading to social exclusion and a diminished sense of self-worth.

22. (B) Damage to self-image due to a social stigma
A spoiled identity refers to the damage inflicted upon an individual's self-image as a result of being socially stigmatized. When a person possesses a trait that society deems undesirable, such as a chronic illness or disability, their identity becomes spoiled in social interactions. This process forces the individual to manage the gap between their actual identity and how others perceive them.

23. (A) Both A and R are true and R is the correct explanation of A.
Interactionists argue that a medical diagnosis is often the result of a negotiation between the doctor and the patient. Both parties bring their own perspectives, expectations, and agendas to the clinical encounter. The final diagnosis emerges from this social interaction, reflecting the power dynamics and communication processes between the professional authority and the individual's subjective account of their symptoms.

24. (A) Labeling fatigue as depression rather than laziness
The negotiation of diagnosis occurs when healthcare providers and patients collaborate or conflict to define a set of symptoms. For instance, framing chronic fatigue as a medical condition like depression, rather than a character flaw like laziness, involves a social labeling process. This medicalization changes the individual's social status, granting them access to the sick role and professional treatment options.

25. (C) A surgeon successfully removing a tumor through technical skill
A self-fulfilling prophecy occurs when a label or expectation influences a person's behavior to make the prediction come true. This is often seen in psychological or social outcomes of diagnosis. However, a surgeon's technical skill in removing a physical tumor is a direct medical intervention based on biological reality and expertise, rather than a result of social labeling or expectations.

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26. (A) Patriarchal control of medical knowledge and practice
Feminists criticize how medical knowledge and practices have historically been dominated by men and patriarchal values. This dominance often leads to the medicalization of natural female biological processes, such as menstruation, pregnancy, and menopause. The perspective argues that the healthcare system frequently serves to control women's bodies and reinforce traditional gender roles rather than addressing women's specific health needs autonomously.

27. (D) P-2, Q-3, R-1
The feminist perspective highlights the medicalization of life stages like menopause. Social constructionists, such as Thomas Szasz, have famously argued that mental illness is a social myth used to control behavior. Postmodernism, influenced by Michel Foucault, introduces the concept of the medical gaze, where the body is viewed through a lens of institutional power and surveillance, fragmenting the individual patient.

28. (B) Feminist view – Women's health is purely biological
The feminist perspective fundamentally rejects the idea that women's health is a purely biological matter. Instead, it emphasizes that health experiences are deeply influenced by social, economic, and political factors within a patriarchal society. This view focuses on the social construction of female illnesses and the way medical institutions exercise control over women's bodies through the medicalization of natural processes.

29. (A) Statement I is correct, but Statement II is incorrect.
Feminists argue that medicalizing menopause transforms a natural life transition into a disease requiring intervention, which Statement I correctly identifies. However, Statement II is incorrect because the medicalization of childbirth has historically shifted control away from women and midwives toward male-dominated medical professions. This process often reduced women's autonomy by prioritizing technological interventions and hospital protocols over the personal experience.

30. (D) 1, 2, and 3
Social constructionism distinguishes between disease as a biological condition and illness as the social experience of being unwell. This perspective argues that definitions of health are not static but evolve across different cultural and historical contexts. Furthermore, medical knowledge is seen as a product of social factors and power dynamics rather than an purely objective, universal truth about the human body.

31. (A) An objective biological condition found in science
In social constructionism, a distinction is made between the biological reality of a disease and the social meaning of illness. While illness is the subjective experience and social labeling of symptoms, disease is typically regarded as the objective, physiological impairment or biological condition identified through medical science. This framework allows sociologists to study how societies interpret and react to biological facts.

32. (B) Thomas Szasz
Thomas Szasz was a prominent psychiatrist who challenged the foundations of modern psychiatry in his work The Myth of Mental Illness. He argued that most conditions labeled as mental illnesses are actually problems in living or deviations from social norms. According to Szasz, using medical labels for behavioral issues is a mechanism of social control that undermines individual responsibility and freedom.

33. (B) It focuses on social barriers and accessibility
The medical model of disability views disability as a physical impairment within the individual's body that needs to be cured or fixed. It places medical professionals as the primary authorities in managing the condition. In contrast, focusing on social barriers and accessibility is the core of the social model of disability, which argues that society's lack of inclusivity causes disability.

34. (A) Both A and R are true and R is the correct explanation of A.
The social model of disability distinguishes between impairment, which is a physical or mental limitation, and disability, which is the social disadvantage caused by an exclusionary environment. This perspective shifts the focus from fixing the individual's body to transforming

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society. It argues that disability is a social construction resulting from systemic barriers that prevent people with impairments from participating fully.

35. (C) Postmodernism
Postmodernism explores how language and discourse shape our understanding of reality, including the human body and health. This perspective emphasizes that medical knowledge is not a universal truth but a construct influenced by power relations. It examines how medical narratives define what is considered normal or deviant, highlighting the role of institutional authority in disciplining and surveilling individual bodies.

36. (D) Viewing patients as collections of symptoms
Michel Foucault used the term medical gaze to describe how modern medicine dehumanizes patients by reducing them to a set of biological symptoms or anatomical parts. This gaze emerged with the development of clinical medicine, allowing doctors to look into the body to find hidden truths. Consequently, the patient's personal experience and personhood are often overlooked in favor of clinical observation.

37. (C) Intersections of knowledge, power, and control
Michel Foucault's work focuses on the intimate relationship between knowledge and power in modern society. In the realm of health, he analyzed how medical discourse establishes authority and exercises control over the human body. Through mechanisms like the clinical gaze and surveillance, the medical establishment defines normalcy and manages populations, illustrating how scientific knowledge functions as a tool for institutional power.

38. (B) Foucault – The Medical Gaze
Michel Foucault is famously associated with the concept of the medical gaze, which explains how medical professionals observe and categorize the human body as a biological object. This reflects his broader interest in how knowledge and power intersect in institutional settings. Other pairings, such as Parsons with iatrogenesis or Marx with stigma, are incorrect as those concepts belong to different theorists.

39. (D) P-1, Q-3, R-4, S-2
Erving Goffman is known for his work on social stigma. Talcott Parsons introduced the functionalist concept of the sick role. Ivan Illich critiqued the medical establishment in Medical Nemesis, where he discussed iatrogenesis. Michel Foucault developed the idea of the medical gaze to describe the shift in clinical perception. These connections represent foundational theories in the sociology of health and illness.

40. (C) Both Statement I and Statement II are correct.
Functionalists view the doctor-patient relationship as a cooperative and necessary interaction that maintains social order by returning individuals to health. Conversely, conflict theorists argue that this relationship is characterized by a significant power imbalance. They believe that doctors, as part of the professional elite, can exploit patients and use their specialized knowledge to maintain social control and economic dominance.

41. (C) Licensed medical practitioners
Within the sick role framework, the obligation to seek technically competent help specifically refers to consulting recognized, licensed medical professionals. This requirement ensures that the illness is managed by experts who have the social authority to legitimize the patient's condition. By relying on scientifically trained practitioners, the social system maintains a standard of care and validates the individual's exemption from duties.

42. (A) 1 and 2 only
According to Parsons, the two primary obligations of the sick role are the sincere desire to get well and the active pursuit of professional medical assistance. While modern healthcare often involves payment, the original sociological model did not include a financial requirement as a formal obligation of the sick role. The focus remained on the normative expectations for behavior during a period of illness.

43. (D) It focuses too much on the patient's individual biology.
The functionalist view is frequently criticized for ignoring social class, assuming universal access to the sick role, and overlooking the power struggles between doctors and patients. However, criticizing it for focusing too much on biology is incorrect; functionalism is actually critiqued for

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focusing too much on the social management of illness while sometimes neglecting the actual physical experience of the disease.

44. (B) Chronically ill patients manage spoiled identities
Erving Goffman's work on stigma and identity suggests that individuals with chronic illnesses or disabilities often face social devaluation. He would agree that these patients must engage in complex management of their spoiled identities to navigate social interactions. This focus on the micro-level experience of being labeled and the resulting impact on self-perception is a central theme in Goffman's interactionist sociology.

45. (A) Both A and R are true and R is the correct explanation of A.
Medicalization can depoliticize social issues by reframing systemic problems as individual medical conditions. For example, if stress caused by poverty is treated solely as a chemical imbalance, the focus shifts to pharmaceutical intervention rather than social or economic reform. This process obscures the political roots of health disparities, allowing the underlying social structures to remain unchallenged while experts manage the symptoms.

46. (D) Harm caused by medical intervention
Clinical iatrogenesis refers to the negative health outcomes and physical injuries that result directly from medical treatment, surgery, or the use of pharmaceutical drugs. It encompasses everything from minor side effects to lethal hospital-acquired infections. Ivan Illich highlighted this concept to demonstrate that modern medicine, despite its intentions, can sometimes create more physiological harm than the benefits it provides to patients.

47. (A) Medicalization
Medicalization is the process by which non-medical conditions or behaviors are redefined as medical problems requiring professional intervention. Through this process, medical experts gain the authority to determine what is considered normal or abnormal in human behavior. This expansion of medical jurisdiction often replaces social, moral, or legal frameworks with clinical ones, significantly increasing the social control exercised by the medical establishment.

48. (B) Postmodernism – Universal objective truths
Postmodernism is fundamentally characterized by a skepticism toward grand narratives and universal objective truths. Instead, it focuses on how knowledge is fragmented, localized, and shaped by power and discourse. Therefore, matching postmodernism with universal truths is incorrect, as this perspective argues that what is accepted as truth in medicine is actually a social construct that varies across different contexts and periods.

49. (B) P-3, Q-1, R-2
Disclosing an illness involves information management, as the individual chooses what to reveal to others. Being treated differently after a diagnosis is a clear example of labeling and its social consequences. Accepting a doctor's definition of symptoms represents a negotiated diagnosis, where the patient and physician reach a shared, though often professional-led, understanding of the individual's subjective experience and medical condition.

50. (A) 1-2-3
Michel Foucault described a historical progression in medical perception. First, the medicine of species focused on classifying diseases based on external symptoms. Next, the medicine of spaces considered disease within the context of the social body. Finally, the birth of the clinic marked a shift toward the individual body, where clinical observation and pathological anatomy became the primary focus of medical practice.

51. (C) Problems in living and social deviations
Thomas Szasz argued that the term mental illness is a misleading metaphor for problems in living. He believed that what psychiatrists label as diseases are actually behaviors that deviate from social or moral norms. By framing these deviations as medical conditions, society avoids dealing with moral conflicts and instead uses the medical system to exercise social control over non-conforming individuals.

52. (D) It shifts control to male-dominated medicine
Many feminists criticize the medicalization of childbirth because it has historically transferred

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control from women and female midwives to a male-dominated medical profession. This shift often prioritizes hospital technology and physician-led protocols over the natural process and the mother's personal choices. Consequently, childbirth is reframed as a high-risk medical event, which can disempower women and undermine their autonomy during labor.

53. (A) Statement I is correct, but Statement II is incorrect.
Marxist sociologists argue that the health of workers is maintained primarily to ensure their continued productivity and the accumulation of capital. Statement I accurately reflects this view. However, Statement II is incorrect because the pharmaceutical industry often avoids developing orphan drugs for rare diseases due to their low profitability. Instead, they prioritize mass-market medications that offer much higher financial returns.

54. (B) The person must pay for their medical consultations.
Talcott Parsons' original formulation of the sick role focused on social expectations rather than financial transactions. The four core features include: exemption from normal duties, lack of responsibility for the condition, the obligation to want to get well, and the duty to seek technically competent help. While paying for care is common, it was not defined as a fundamental sociological requirement.

55. (D) 1, 2, and 3
Interactionist studies recognize several models of doctor-patient encounters based on the nature of the condition. Activity-passivity is common in emergencies where the patient is unconscious. Guidance-cooperation occurs in acute situations where the patient follows the doctor's lead. Mutual participation is seen in chronic illness management, where the patient takes an active role in their long-term care alongside the medical professional.

56. (A) Alliances of doctors, firms, and insurers
In the conflict perspective, the medical-industrial complex refers to the powerful alliance of pharmaceutical companies, medical equipment manufacturers, healthcare providers, and insurance firms. This complex is seen as a profit-driven system that prioritizes economic interests over the health of the population. It highlights how healthcare is commodified and how these corporate entities exert significant influence over medical policy and practice.

57. (C) Science is always purely objective and free from social influence.
Postmodernism rejects the notion that science is purely objective and free from social influence. Instead, it argues that all knowledge, including medical science, is shaped by cultural context, language, and power relations. This perspective views medicine as one of many grand narratives that should be questioned, rather than an absolute source of universal and unbiased truth about the human body.

58. (A) Both A and R are true and R is the correct explanation of A.
Chronic illness often causes a biographical disruption, a concept describing how a serious health condition shatters an individual's life expectations and self-image. It forces a fundamental re-evaluation of one's identity, daily routines, and future plans. This disruption is a central theme in the sociology of chronic illness, highlighting that the experience involves much more than just managing physical symptoms.

59. (D) Destroying the ability to suffer meaningfully
Cultural iatrogenesis refers to the process by which modern medicine erodes a society's traditional ways of dealing with pain, sickness, and death. According to Ivan Illich, by over-medicalizing these universal human experiences, people lose the ability to suffer meaningfully and manage their own health autonomously. This results in a cultural dependence on professional experts and a decline in individual resilience.

60. (B) P-2, 4; Q-1, 3
The medical model of disability focuses on individual rehabilitation and surgical interventions to fix impairments. Conversely, the social model of disability emphasizes the removal of environmental barriers and political activism to secure equal rights. This distinction highlights the shift from viewing disability as a personal medical problem to seeing it as a social issue caused by an exclusionary environment.

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61. (C) The counter-productivity of modern medicine
In Medical Nemesis, Ivan Illich presents a scathing critique of the counter-productivity of modern medicine. He argues that the medical establishment has become a threat to health because its interventions often create more illness than they cure. Illich explores how excessive medicalization damages the physiological, social, and cultural aspects of life, ultimately undermining the autonomy and well-being of the population.

62. (D) Expansion of the medical domain into everyday life
Social iatrogenesis is defined as the expansion of medical authority and jurisdiction into nearly all aspects of human life. This includes the medicalization of natural life stages, such as birth, aging, and death, which were previously managed through social and cultural traditions. It leads to a society where people become increasingly dependent on professional medical management for their routine well-being.

63. (A) Healthcare systems contribute to social integration
A core assumption of structural functionalism is that the healthcare system is a vital institution that contributes to social integration and stability. By treating illness and returning individuals to their productive roles, the system helps maintain the smooth functioning of society. This perspective views medical practice as a necessary mechanism for managing social deviance and ensuring the population remains healthy.

64. (B) Parsons – Conflict Perspective
Talcott Parsons is the primary theorist associated with structural functionalism, not the conflict perspective. His work on the sick role emphasizes how society maintains stability through the management of illness. In contrast, conflict theorists focus on power imbalances and economic exploitation. Other accurately matched sociologists include Szasz with social construction, Foucault with power/knowledge, and Illich with the concept of iatrogenesis.

65. (B) Chronic patients cannot fulfill the duty to get well
A major criticism of Parsons' sick role model is its poor fit for chronic illness. One of the fundamental obligations of the sick role is the duty to want to get well and work toward recovery. Since chronic conditions are permanent or long-term, patients cannot fulfill this expectation. This creates a conceptual problem where they are perpetually stuck in a role.

66. (C) Both Statement I and Statement II are correct.
Interactionists argue that labels applied by doctors can lead to a self-fulfilling prophecy, where the patient's behavior aligns with the professional diagnosis. Simultaneously, functionalists contend that labeling and categorization are essential for the medical system to operate efficiently. These labels allow for standardized treatment protocols and the clear assignment of the sick role, which are necessary for maintaining social order.

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67. (C) The biological superiority of women's immune systems
The feminist perspective on health focuses on social and political issues, such as the medicalization of pregnancy, the underrepresentation of women in high-status medical roles, and the historical use of diagnoses like hysteria to control female behavior. It does not typically focus on the biological superiority of women's immune systems, as its primary goal is to critique the social construction of gender.

68. (D) Negotiated Order
When a patient and doctor engage in a process of disagreement and eventual compromise regarding a diagnosis or treatment plan, this illustrates the negotiated order. This concept, rooted in symbolic interactionism, suggests that social reality in a clinical setting is not fixed but is constantly being shaped through the interactions and bargaining of the individuals involved, reflecting their differing perspectives and interests.

69. (C) Control those who exhibit non-conformist behavior
According to Thomas Szasz, labeling an individual as mentally ill serves as a powerful mechanism to control those who exhibit non-conformist behavior. By medicalizing social or moral deviations, the state and the psychiatric establishment can manage and discipline individuals who challenge the status quo. This process frames social problems as individual

medical pathologies, thereby avoiding the need for genuine social reform.

70. (B) Erving Goffman
Erving Goffman is the sociologist most associated with the study of total institutions, such as asylums and prisons. He explored how these highly regulated environments strip individuals of their former identities through a process of mortification. In these settings, all aspects of life are controlled by a single authority, which has a profound and often damaging impact on the residents' self-concept.

71. (D) It views the patient as a unique person with a story.
Michel Foucault's concept of the medical gaze actually emphasizes the opposite: it dehumanizes the patient by focusing purely on their physical symptoms and internal pathology. Rather than viewing the patient as a unique person with a personal story, the gaze reduces them to an object of clinical observation. It separates the body from the individual's personhood, facilitating institutional surveillance and control.

72. (A) Disability dominates their social identity.
For a person with a visible disability, a spoiled identity implies that the disability becomes their master status, overshadowing all other aspects of their character and identity in social interactions. Society tends to perceive and judge them primarily through the lens of their physical impairment. This process of stigmatization can lead to social exclusion and a diminished sense of self for the individual.

73. (C) Medicine – An instrument of social control
From a conflict perspective, medicine is seen as an instrument of social control used to maintain the existing power structure. This view highlights how medical professionals and institutions define normalcy and deviance to manage the population. Unlike the functionalist view of social stability, conflict theorists focus on how the medical establishment serves the interests of the elite classes and pharmaceutical corporations.

74. (A) Right to not be blamed for the illness
A fundamental right within Talcott Parsons' sick role framework is that the individual is not held responsible for their condition. Illness is viewed as a state that the person cannot simply will away. As long as they fulfill their obligations, such as wanting to get well and seeking professional help, they are socially excused and not blamed for their inability to work.

75. (D) Social
Ivan Illich categorized the medicalization of death under social iatrogenesis. This refers to the process where the natural event of dying is brought under professional medical control, often occurring within the sterile environment of a hospital rather than the home. It reflects a broader social shift where medicine increasingly regulates the major transitions of life, making individuals dependent on experts even at life's end.

76. (C) Both Statement I and Statement II are correct.
Michel Foucault argued that the medical gaze allows clinicians to perceive hidden biological truths through observation and technology. Simultaneously, he contended that this gaze subjects the human body to increased institutional surveillance and discipline. Both statements accurately reflect his theory that medical knowledge is not merely a scientific tool but a manifestation of power that objectifies and monitors individuals.

77. (C) The doctor-patient relationship is based on a power struggle.
Functionalism assumes that the doctor-patient relationship is cooperative and harmonious, working toward the common goal of restoring health. This perspective emphasizes system maintenance rather than conflict. The idea that this relationship is characterized by a power struggle is a core tenet of conflict theory, which critiques the authority and dominance of medical professionals over patients in a capitalist or patriarchal society.

78. (D) Stigma is a social process of devaluation.
Erving Goffman viewed stigma as a social process through which individuals are devalued because they possess an attribute that society considers undesirable. Stigma is not inherently biological; it is a social construction that arises during interaction. This devaluation can significantly impact a person's life by creating barriers to social

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acceptance and forcing the individual to manage a spoiled identity in various contexts.

79. (A) Staff and patients engage in informal bargaining.
Interactionists focus on the negotiated order of hospitals, suggesting that rules and roles are not strictly fixed. Instead, staff and patients engage in constant, informal bargaining to navigate the daily reality of medical care. This perspective highlights the micro-level social interactions and the way individuals use their agency to influence outcomes, rather than simply following a rigid, top-down institutional structure.

80. (B) Szasz – The Medical Model of Disability
Thomas Szasz is known for his critique of psychiatry and the idea that mental illness is a social myth, not for the medical model of disability. In fact, his views align more with social constructionism. Other pairs are correct: Goffman developed impression management, Illich wrote about deschooling and iatrogenesis, and Parsons introduced the concept of the sick role within functionalism.

81. (B) It focuses on societal barriers rather than defects.
Disability activists prefer the social model because it shifts the focus from the individual's physical or mental defects to the barriers created by society. This model argues that people are disabled by an inaccessible environment and discriminatory attitudes rather than by their impairments. By emphasizing social change and equal rights, it empowers individuals to advocate for inclusion rather than focusing on cures.

82. (A) Medicalization
Medicalization is the social process of defining and treating human conditions or behaviors as medical problems. This occurs when non-medical issues, such as hyperactivity or menopause, are reframed as illnesses requiring professional diagnosis and treatment. This expansion of medical jurisdiction increases the authority of the medical establishment and often leads to the pharmaceutical management of experiences that were previously understood through other frameworks.

83. (C) It involves a loss of self and identity struggle.
Symbolic interactionists view chronic illness as a profound social and personal experience that often involves a loss of self. Individuals must navigate the identity struggle that comes with physical decline and the loss of former social roles. This perspective focuses on how people manage their changing self-concept and the meanings they attach to their long-term condition through ongoing social interactions.

84. (D) Psychological
Ivan Illich identified three specific types of iatrogenesis: clinical, social, and cultural. Clinical refers to direct medical harm, social to the expansion of medical authority, and cultural to the erosion of traditional coping mechanisms. While medical interventions can have psychological impacts, Illich did not categorize psychological iatrogenesis as one of his primary theoretical types in his critique of the medical establishment.

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85. (C) The patient must defer to a trained physician.
The obligation to seek technically competent help requires the sick individual to defer to the authority of a trained and licensed medical professional. This ensures that the patient's condition is managed according to scientific standards and that their entry into the sick role is socially legitimized. Relying on experts like doctors is a key component of the functionalist model for managing illness.

86. (A) Statement I is correct, but Statement II is incorrect.
Statement I correctly identifies a Marxist critique: capitalism prioritizes profitable lifestyle drugs for the wealthy over essential vaccines for the poor. However, Statement II is incorrect because this argument belongs to conflict theory or Marxism, not functionalism. Functionalism focuses on how institutions maintain social stability and order, rather than critiquing the profit motives and class inequalities inherent in the healthcare industry.

87. (D) He supported involuntary commitment for all depressed persons.
Thomas Szasz was a staunch opponent of involuntary psychiatric commitment. He believed that individuals should be responsible

for their own behaviors and that the state should not use psychiatry to deprive people of their liberty. His view that mental illness is a metaphor led him to argue against the coercive practices of the psychiatric establishment, making Statement D entirely incorrect.

88. (A) Menopause – A natural life stage.
From a feminist perspective, menopause is viewed as a natural life stage rather than a disease or deficiency that requires medical intervention. This view critiques the medicalization of women's bodies, where natural biological processes are reframed as pathologies. Feminists argue for reclaiming the natural experience of menopause and resisting the pressure to treat it through pharmaceutical means like hormone replacement therapy.

89. (C) The ability to define truth regarding the body
In Michel Foucault's analysis, power in medicine is the ability of the medical establishment to define truth about the human body. This power/knowledge allows doctors to determine what is normal or pathological. Through medical discourse and clinical observation, the establishment exercises control by disciplining bodies and regulating life, rather than just through economic or physical force within the healthcare system.

90. (A) Returning individuals to productive social roles.
Within the functionalist sick role framework, wanting to get well is a normative obligation because it ensures that illness is temporary. The primary goal of the social system is to return individuals to their productive roles as quickly as possible to maintain social stability. If people did not desire recovery, illness would become a permanent, dysfunctional state that disrupts the functioning of society.

91. (D) Discreditable stigma
Erving Goffman used the term discreditable stigma to describe attributes that are not immediately visible to others, such as a history of mental illness or a hidden physical condition. Individuals with discreditable stigma must engage in information management, carefully choosing when and to whom they reveal their condition to avoid the social devaluation and discrimination that would occur if it were known.

92. (B) Status is maintained by restricting medical knowledge.
From a conflict perspective, medical professionals maintain their high social status and power by restricting access to specialized medical knowledge. This creates a dependency on experts and reinforces the authority of the medical elite. Conflict theorists argue that this professional dominance is used to protect the interests of the medical-industrial complex and to maintain social and economic inequality within society.

93. (C) Economic structures determine the health of the population.
Symbolic interactionism focuses on the micro-level of human interaction and the subjective meanings people attach to health and illness. It assumes that social reality is constructed through communication. The idea that macro-level economic structures determine health outcomes is a core assumption of the conflict perspective or Marxism, which focuses on structural inequalities rather than individual social interactions and meanings.

94. (C) Both Statement I and Statement II are correct.
Postmodernists view the body as a project that individuals actively shape through lifestyle choices and medical interventions. This perspective also rejects the idea of a single, universal medical truth, arguing instead that health and the body are understood through various competing discourses. Both statements accurately reflect the postmodern emphasis on individual agency, the fragmentation of knowledge, and the deconstruction of authority.

95. (A) Interactionism – Focus on pharmaceutical profit
Interactionism focuses on the micro-level meanings and social experiences of health and illness, not on macro-level economic issues like pharmaceutical profit. The focus on corporate profit is a hallmark of the conflict perspective. The other pairings—social model with societal barriers, medical model with impairment, and postmodernism with the medical gaze—are all accurate representations of their respective theoretical frameworks.

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96. (B) The self-fulfilling prophecy
This scenario is a classic example of a self-fulfilling prophecy in a medical context. When a doctor applies a negative label or prediction, the patient may internalize this expectation and change their behavior accordingly. In this case, the patient's belief that they cannot walk leads to physical inactivity and muscle atrophy, making the initial prediction a reality through social and psychological mechanisms.

97. (B) They produce more illness than they cure.
Ivan Illich argued that medical systems become counter-productive when their negative impacts outweigh their benefits. This occurs when the expansion of medical authority leads to clinical, social, and cultural iatrogenesis. In this state, the medical establishment itself becomes a major health hazard, creating new forms of illness and dependency that undermine the very well-being it was originally intended to promote.

98. (A) All life is conducted under a single authority.
Erving Goffman defined a total institution as a place where a large number of people live and work under a single, overarching authority. In these settings, such as asylums or prisons, all aspects of daily life—sleeping, eating, and recreation—are strictly scheduled and regulated. This total control strips individuals of their autonomy and forces them to adapt to the institutional identity.

99. (C) The sick role is a necessary way to maintain social harmony.
The idea that the sick role is necessary to maintain social harmony is a functionalist perspective, not a Marxist one. Marxism critiques the healthcare system for serving ruling class interests, commodifying health for profit, and neglecting the occupational hazards faced by workers under capitalism. Marxists see the sick role more as a form of social control than a tool for genuine harmony.

100. (D) Social expectations for those who are ill
The sick role is a sociological concept that refers to the specific social expectations and norms associated with being ill. It defines the rights and obligations that a person must fulfill to be socially recognized as sick. This role ensures that illness is managed in a way that minimizes its disruption to the broader social system, according to the functionalist perspective.

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CHAPTER 03
Health in India

1. Consider the following statements regarding the rural-urban health divide in India:
1. Rural areas face a significant shortage of specialist doctors compared to urban areas.
2. Urban healthcare is predominantly characterized by public sector secondary care facilities.
3. The rural-urban health divide is characterized by disparities in both infrastructure and health outcomes.

Which of the statements given above are correct?
(A) 1 and 2 only
(B) 2 and 3 only
(C) 1 and 3 only
(D) 1, 2, and 3

2. What is the primary focus of the "Rural-Urban Health Divide" overview in the Indian context?
(A) Disparities in healthcare access, infrastructure, and outcomes.
(B) Uniform distribution of resources across geographical regions.
(C) Management of pharmaceutical exports in metropolitan areas.
(D) Compulsory relocation of all specialist doctors to rural sectors.

3. According to recent data, which of the following is a major reason for the low doctor-population ratio in rural India?
(A) Excessive density of medical institutions in the rural belts.
(B) High financial incentives for practicing in remote villages.
(C) Preference for urban lifestyle and superior infrastructure.
(D) Severe over-saturation of Primary Health Centre staff levels.

4. The following question consists of two statements—Assertion (A) and Reason (R). Answer the question by selecting the appropriate option.

Assertion (A): The Community Health Centre (CHC) acts as the first referral unit (FRU) for the rural population.
Reason (R): PHCs are designed to provide comprehensive secondary healthcare including complex surgeries.
(A) Both A and R are true and R is the correct explanation of A.
(B) Both A and R are true but R is not the correct explanation of A.
(C) A is true but R is false.
(D) A is false but R is true.

5. Which of the following is an INCORRECT statement regarding hospital bed availability in India?
(A) Urban India has a significantly higher number of hospital beds per 1,000 population than rural India.
(B) Rural hospital beds are primarily concentrated in public sector Primary Health Centres.
(C) Most tertiary care beds are located in rural community centers.
(D) The disparity in bed availability leads to increased travel time for rural patients.

6. Which of the following pairs is correctly matched regarding the rural health structure?
(A) Sub-centre : 100,000 population in hilly terrain
(B) Primary Health Centre : 30,000 population in plains
(C) Community Health Centre : 5,000 population coverage
(D) ASHA Worker : 10,000 population within city limits

7. Match List I with List II and select the correct answer using the codes given below:
List I: (Health Facility)
P. Sub-centre
Q. Primary Health Centre (PHC)

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R. Community Health Centre (CHC)
S. ASHA Worker
List II: (Population Norms in Plain Areas)
1. 1,000
2. 5,000
3. 30,000
4. 1,20,000
(A) P-2, Q-3, R-4, S-1
(B) P-1, Q-2, R-3, S-4
(C) P-3, Q-4, R-1, S-2
(D) P-4, Q-1, R-2, S-3

8. Which of the following is NOT a primary role of an Accredited Social Health Activist (ASHA)?
(A) Performing major surgical procedures at the village level.
(B) Creating awareness about nutrition and sanitation.
(C) Acting as a bridge between the community and the public health system.
(D) Escorting pregnant women to the health facility for delivery.

9. In the context of rural health, what is the primary role of an Auxiliary Nurse Midwife (ANM)?
(A) Managing administrative finances of the District Hospital.
(B) Operating intensive care units in urban private hospitals.
(C) Providing immunization, prenatal, and postnatal care.
(D) Formulating national healthcare policies in the capital.

10. The following question consists of two statements—Assertion (A) and Reason (R). Answer the question by selecting the appropriate option.
Assertion (A): Urban slum populations often face worse health outcomes than the general urban population.
Reason (R): Overcrowding and lack of basic sanitation in slums facilitate the spread of communicable diseases.
(A) Both A and R are true and R is the correct explanation of A.
(B) Both A and R are true but R is not the correct explanation of A.
(C) A is true but R is false.
(D) A is false but R is true.

11. Consider the following statements regarding Migration and Health Risks:
1. Migrant workers often live in unhygienic conditions increasing vulnerability to infectious diseases.
2. Migration can lead to a disruption in the continuity of healthcare for chronic conditions.
3. Migrants are automatically covered under all urban health insurance schemes upon arrival.
Which of the statements given above are correct?
(A) 1 and 2 only
(B) 2 and 3 only
(C) 1 and 3 only
(D) 1, 2, and 3

12. Which of the following health indicators is a key focus of the National Family Health Survey-5 (NFHS-5)?
(A) Fluctuations in the global pharmaceutical market.
(B) Anemia prevalence in women and children.
(C) Total number of medical college seats available.
(D) Total export volume of medicinal components.

13. Match List I with List II and select the correct answer using the codes given below:
List I: (Indicator)
P. Infant Mortality Rate (IMR)
Q. Maternal Mortality Rate (MMR)
R. Under-5 Mortality Rate
S. Neonatal Mortality Rate
List II: (Definition)
1. Deaths per 1,00,000 live births
2. Deaths per 1,000 live births (within first year)
3. Deaths per 1,000 live births (within first 28 days)
4. Deaths per 1,000 live births (before age 5)
(A) P-2, Q-1, R-4, S-3
(B) P-1, Q-2, R-3, S-4
(C) P-4, Q-3, R-2, S-1
(D) P-3, Q-4, R-1, S-2

14. What is the most appropriate description of "Stunting" in children?
(A) Low weight for age.
(B) Low weight for height.

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(C) High BMI for age.
(D) Low height for age.

15. According to National Family Health Survey-5 (NFHS-5) data, what is the general trend of the Infant Mortality Rate (IMR) in India compared to NFHS-4?
(A) It has shown a declining trend.
(B) It has increased significantly.
(C) It has remained stagnant.
(D) It has doubled in rural areas.

16. The following question consists of two statements—Assertion (A) and Reason (R). Answer the question by selecting the appropriate option.
Assertion (A): The POSHAN Abhiyaan aims to reduce stunting, undernutrition, and anemia.
Reason (R): It focuses on the first 1,000 days of a child's life as a critical window for intervention.
(A) Both A and R are true and R is the correct explanation of A.
(B) Both A and R are true but R is not the correct explanation of A.
(C) A is true but R is false.
(D) A is false but R is true.

17. Which component of the Mid-Day Meal Scheme primarily impacts child health?
(A) Reducing the workload of government school teachers.
(B) Nutritional support and school attendance.
(C) Instruction in preparing professional gourmet meals.
(D) Modernization of school classroom infrastructure.

18. Which condition is characterized by a deficiency of hemoglobin in the blood, highly prevalent among Indian women?
(A) Anemia
(B) Hypertension
(C) Diabetes
(D) Obesity

19. Match List I with List II and select the correct answer using the codes given below:
List I: (Malnutrition Type)
P. Wasting
Q. Stunting
R. Obesity
S. Undernutrition
List II: (Key Characteristic)
1. Chronic malnutrition (Height-for-age)
2. Acute malnutrition (Weight-for-height)
3. Excessive fat accumulation
4. General lack of adequate calories
(A) P-2, Q-1, R-3, S-4
(B) P-1, Q-2, R-3, S-4
(C) P-4, Q-3, R-2, S-1
(D) P-3, Q-4, R-1, S-2

20. What describes the "Poverty-Disease Cycle"?
(A) High income levels leading to sedentary lifestyle diseases.
(B) Eradication of chronic diseases through wealth distribution.
(C) Professional loss of income due to rising population health.
(D) Poverty causing illness which triggers further financial loss.

21. Consider the following statements regarding the BPL (Below Poverty Line) population and health access:
1. High out-of-pocket expenditure often pushes BPL families deeper into debt.
2. Lack of awareness often prevents BPL families from utilizing available public health schemes.
3. BPL families have exclusive access to all private hospitals for free treatment without any documentation.
Which of the statements given above are correct?
(A) 1 and 2 only
(B) 2 and 3 only
(C) 1 and 3 only
(D) 1, 2, and 3

22. The following question consists of two statements—Assertion (A) and Reason (R). Answer the question by selecting the appropriate option.
Assertion (A): Open defecation is a major contributor to the high disease burden of diarrhea in rural India.
Reason (R): Open defecation leads to the contamination of water sources and the environment with fecal pathogens.
(A) Both A and R are true and R is the correct explanation of A.
(B) Both A and R are true but R is not the correct

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explanation of A.
(C) A is true but R is false.
(D) A is false but R is true.

23. What was a primary objective of the Swachh Bharat Mission (Gramin)?
(A) Building multi-specialty medical colleges in every village.
(B) Construction of private luxury resorts in rural belts.
(C) Distributing free smartphones to all rural households.
(D) Achieving Open Defecation Free (ODF) status.

24. Which of the following is a direct health benefit of safe drinking water access in rural areas?
(A) Reduction in water-borne diseases.
(B) Improvement in local air quality indices.
(C) Decline in local student literacy rates.
(D) Growth of urban agricultural preferences.

25. Match List I with List II and select the correct answer using the codes given below:
List I: (Scheme/Program)
P. Jal Jeevan Mission
Q. Swachh Bharat Mission
R. POSHAN Abhiyaan
S. Mid-Day Meal
List II: (Primary Focus)
1. Tap water connection to every household
2. Sanitation and ODF
3. Nutritional status of children/mothers
4. School-based nutritional support
(A) P-1, Q-2, R-3, S-4
(B) P-4, Q-3, R-2, S-1
(C) P-2, Q-1, R-4, S-3
(D) P-3, Q-4, R-1, S-2

26. Which of the following is a common communicable disease that remains a significant challenge in rural India?
(A) Tuberculosis
(B) Type 2 Diabetes
(C) Hypertension
(D) Osteoarthritis

27. "Double burden of disease" refers to:
(A) Sustaining dual orthopedic injuries in a single accident.
(B) Paying twice for identical medical procedures and tests.
(C) Health issues specifically affecting elderly demographics.
(D) Simultaneous prevalence of communicable and NCDs.

28. The following question consists of two statements—Assertion (A) and Reason (R). Answer the question by selecting the appropriate option.
Assertion (A): Non-communicable diseases (NCDs) like diabetes and hypertension are rising in urban India.
Reason (R): Urbanization is often associated with sedentary lifestyles and changes in dietary patterns.
(A) Both A and R are true and R is the correct explanation of A.
(B) Both A and R are true but R is not the correct explanation of A.
(C) A is true but R is false.
(D) A is false but R is true.

29. Which factor most significantly influences health-seeking behavior in rural India?
(A) Household access to high-speed fiber internet.
(B) Local variations in regional climatic patterns.
(C) Proximity and cost of professional healthcare.
(D) Recent fluctuations in the global capital markets.

30. What is a consequence of high "Out-of-Pocket" health expenditure in India?
(A) Significant increase in average national savings.
(B) Rapid achievement of universal health insurance targets.
(C) Universal reduction in medical degree counts.
(D) Financial catastrophe and family impoverishment.

31. Match List I with List II and select the correct answer using the codes given below:
List I: (Health Level)
P. Village level
Q. Sub-centre level
R. Block level

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S. District level

List II: (Institutional Body)

1. ASHA
2. ANM
3. CHC
4. District Hospital

(A) P-1, Q-2, R-3, S-4
(B) P-4, Q-3, R-2, S-1
(C) P-2, Q-1, R-4, S-3
(D) P-3, Q-4, R-1, S-2

32. Which of the following is a characteristic of health problems in urban slums?
(A) Excellent ventilation and high-quality housing.
(B) High prevalence of respiratory infections due to overcrowding.
(C) Universal access to clean, treated tap water in every room.
(D) Low population density and vast open spaces.

33. Consider the following statements regarding the Jal Jeevan Mission:
1. It aims to provide Functional Household Tap Connections (FHTC) to every rural household.
2. It has a target year of 2024 for completion.
3. Safe water supply is critical for reducing the burden of diarrheal diseases.

Which of the statements given above are correct?
(A) 1 and 2 only
(B) 2 and 3 only
(C) 1 and 3 only
(D) 1, 2, and 3

34. Which of the following is NOT one of the primary classifications of malnutrition?
(A) Hyperactivity
(B) Stunting
(C) Wasting
(D) Obesity

35. "Health seeking behavior" refers to:
(A) Recruitment methods for clinical hospital staff.
(B) Administrative searches for hospital construction sites.
(C) Actions taken for health maintenance or treatment.
(D) Scientific research protocols for pharmaceutical trials.

36. In India, the majority of out-of-pocket health expenditure is spent on:
(A) Monthly administrative costs for hospital room rent.
(B) Cosmetic and elective aesthetic surgical procedures.
(C) Annual premiums for private medical insurance plans.
(D) Medicines and professional outpatient consultations.

37. Which of the following statements about Maternal Mortality Rate (MMR) is correct?
(A) It is calculated per 1,000 live births in the region.
(B) India has successfully reached a zero mortality count.
(C) It reflects risks of death in pregnancy and childbirth.
(D) Urban areas have higher rates due to climate factors.

38. Which of the following represents an INCORRECT pair?
(A) Diarrhea — Water-borne disease
(B) Malaria — Non-communicable disease
(C) Hypertension — Non-communicable disease
(D) Tuberculosis — Communicable disease

39. The POSHAN Abhiyaan is also known as:
(A) National Health Mission
(B) Swachh Bharat Abhiyaan
(C) Jal Shakti Abhiyaan
(D) National Nutrition Mission

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40. Arrange the following health facilities in ascending order of the population they typically serve in plain areas:
1. Primary Health Centre
2. Sub-centre
3. Community Health Centre

(A) 1—2—3
(B) 2—1—3
(C) 3—2—1
(D) 2—3—1

41. Which of the following is a key reason for health risks among rural-to-urban migrants?

(A) Widespread over-nutrition in the metropolitan sectors.
(B) Better environmental air quality in urban slums.
(C) Lack of social support and poor living conditions.
(D) Permanent immunity acquired from local urban pathogens.

42. What does the term "Wasting" indicate in a child's nutritional status?
(A) Low weight for height.
(B) High height for age.
(C) Low height for weight.
(D) High weight for age.

43. Which of the following is a function of the Community Health Centre (CHC)?
(A) Providing only primary level immunization services.
(B) Acting as the village administrative sanitation board.
(C) Management of international medical travel visas.
(D) Referral centre for PHCs with specialist consultations.

44. Consider the following statements about the Swachh Bharat Mission (SBM):
1. SBM-Gramin focuses on sustaining ODF status and solid-liquid waste management.
2. It has no impact on the health of children under five.
3. Access to toilets reduces the incidence of soil-transmitted helminths.

Which of the statements given above are correct?
(A) 1 and 2 only
(B) 1 and 3 only
(C) 2 and 3 only
(D) 1, 2, and 3

45. Which of the following is NOT a core objective of the POSHAN Abhiyaan?
(A) Reduction of stunting in children.
(B) Reduction of anemia in young children and women.
(C) Reduction of the number of medical colleges in India.
(D) Reduction of low birth weight.

46. Read the given statements and select the correct option.
Statement I: The doctor-population ratio in India is more favorable in urban areas than in rural areas.
Statement II: Rural healthcare relies heavily on the three-tier system of Sub-centres, PHCs, and CHCs.
(A) Statement I is correct, Statement II is incorrect.
(B) Statement I is incorrect, Statement II is correct.
(C) Both statements are correct.
(D) Both statements are incorrect.

47. Identify the correct pair regarding the Under-5 Mortality Rate:
(A) Under-5 Mortality — Deaths before age five.
(B) Under-5 Mortality — Deaths before tenth birth.
(C) Under-5 Mortality — Deaths between age 5 and 10.
(D) Under-5 Mortality — Deaths only from accidents.

48. Which of the following is the best strategy to improve health access for the BPL population in India?
(A) Increasing market prices of all essential medication.
(B) Public infrastructure growth and financial protection.
(C) Decommissioning all existing rural primary care units.
(D) Restricting health insurance coverage to high-income groups.

49. How is the ASHA worker selected?
(A) Through a competitive national entrance examination.
(B) Locally selected resident woman from the community.
(C) Direct appointment by the central executive branch.
(D) Recruitment from a pool of foreign health volunteers.

50. Arrange the following in the correct sequence of the referral chain starting from the village level:
1. Community Health Centre
2. Sub-centre

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3. Primary Health Centre

(A) 2—3—1
(B) 1—2—3
(C) 3—1—2
(D) 2—1—3

51. What is the main cause of the "Poverty-Disease Cycle"?
(A) Significant increase in regional literacy rates.
(B) Excessive abundance of medical specialist doctors.
(C) Lack of financial resources for nutrition and care.
(D) High costs associated with medical degree education.

52. In urban India, which type of diseases is becoming increasingly prevalent?
(A) Purely tropical infectious diseases found in the wild.
(B) Conditions caused solely by lack of school exercise.
(C) Pathogens that have been totally eradicated globally.
(D) Non-communicable diseases like diabetes and heart issues.

53. Which of the following is a primary role of the Sub-centre in rural India?
(A) Conducting complex heart and organ transplantations.
(B) Managing pharmaceutical export licensing for the state.
(C) Providing basic maternal and child health services.
(D) Supervising the administrative tasks of the District Hospital.

54. Which condition is most likely to be exacerbated by open defecation?
(A) Hypertension
(B) Cholera
(C) Malaria
(D) Diabetes

55. The NFHS-5 survey provides data on which of the following?
(A) National highway expansion projects.
(B) Monthly regional rainfall patterns.
(C) Average residential internet speeds.
(D) Child nutrition and mortality indicators.

56. What is the significance of the 1,000 days window in POSHAN Abhiyaan?
(A) Pregnancy and first two years for optimal growth.
(B) Time period required for medical degree completion.
(C) Recovery period for most chronic respiratory diseases.
(D) Time needed to eliminate anemia in the workforce.

57. Which of the following is an INCORRECT statement regarding ANMs?
(A) They are based at the Sub-centre.
(B) They are key players in the immunization program.
(C) They are usually male health workers.
(D) They provide antenatal care to pregnant women.

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58. Which of the following describes the health risk associated with migration?
(A) Access issues due to lack of local identity proof.
(B) Automatic reduction in physical and mental stress.
(C) Immediate access to private healthcare free of charge.
(D) Guaranteed provision of high-quality urban housing.

59. The term "rural-urban health divide" implies that:
(A) Rural areas possess more advanced medical technologies.
(B) Infectious diseases only exist in rural environments.
(C) Urban residents no longer require hospital facilities.
(D) Urban doctor surplus while rural areas face shortages.

60. Which of the following is a major communicable disease burden in India?
(A) Asthma
(B) Malaria
(C) Obesity
(D) Glaucoma

61. High out-of-pocket expenditure on health in India primarily leads to:
(A) Increased luxury spending.
(B) Better health outcomes for the poor.
(C) Medical impoverishment.
(D) Lowering of overall hospital costs.

62. What is the focus of the "Anemia Mukt Bharat" strategy within the health framework?
(A) Reducing blood pressure.
(B) Promoting blood donation for surgery.
(C) Increasing the height of children.
(D) Reducing the prevalence of iron deficiency.

63. Which of the following statements about sanitation coverage in rural India is true?
(A) Significant increase due to government intervention.
(B) Decrease following the Swachh Bharat Mission start.
(C) Absolute zero correlation with child mortality rates.
(D) Total 100% coverage since the time of independence.

64. Which of the following is a function of a Primary Health Centre (PHC)?
(A) Serving as the sole referral center for the district.
(B) Providing basic indoor and outdoor healthcare services.
(C) Performing specialized neurosurgical procedures.
(D) Responsibility for auditing district financial records.

65. Stunting in children is a measure of:
(A) Short-term hunger.
(B) Chronic undernutrition.
(C) Acute infection.
(D) High caloric intake.

66. The Mid-Day Meal Scheme is implemented in:
(A) Government and government-aided schools.
(B) Private vocational training centers.
(C) Community recreation halls.
(D) Private coaching institutes.

67. Which of the following is a health challenge specific to urban slums?
(A) Shortage of manual labor.
(B) Lack of access to private pharmacies.
(C) High incidence of vector and respiratory disease.
(D) Systematic under-utilization of land for housing.

68. What is the main objective of the Jal Jeevan Mission?
(A) To supply bottled mineral water to every primary school.
(B) To implement ocean cleaning initiatives across the coast.
(C) To subsidize household water purification equipment.
(D) To provide tap water to every rural household by 2024.

69. Maternal Mortality Rate is usually expressed as:
(A) Deaths per 1,000 live births.
(B) Deaths per 1,00,000 live births.
(C) Deaths per 10,000 live births.
(D) Deaths per 1,000 total population.

70. Which of the following is a non-communicable disease (NCD)?
(A) Tuberculosis
(B) Diabetes
(C) Diarrhea
(D) Malaria

71. Infant Mortality Rate (IMR) is the number of deaths of children:
(A) Under 5 years of age per 1,000 live births.
(B) Under 1 month of age per 1,000 live births.
(C) Under 10 years of age per 1,000 live births.
(D) Under 1 year of age per 1,000 live births.

72. What is the role of the Community Health Centre (CHC) in the rural health hierarchy?
(A) Secondary healthcare and referral center for PHCs.
(B) Primary first point of contact with any doctor.
(C) Village level first aid and minor wound provider.
(D) Specialized medical research and trial institute.

73. Which of the following is NOT an objective of the Swachh Bharat Mission?
(A) Eradication of manual scavenging.

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(B) Modern and scientific municipal solid waste management.
(C) Increasing the total number of medical colleges.
(D) Effecting behavioral change regarding healthy sanitation practices.

74. ASHA stands for:
(A) Accredited Social Health Activist.
(B) Associated Social Health Association.
(C) Accredited Senior Health Auxiliary.
(D) Association of Social Health Assistants.

75. Malnutrition includes which of the following?
(A) Only undernutrition.
(B) Only overnutrition (obesity).
(C) Both undernutrition and overnutrition.
(D) Only vitamin deficiencies.

76. Which of the following best describes "Out-of-pocket expenditure"?
(A) Funds allocated by the state for public health.
(B) Direct individual payments to healthcare providers.
(C) Insurance premiums covered by a primary employer.
(D) Corporate taxes paid for private health services.

77. Under-5 mortality rate is an indicator of:
(A) Average adult health status.
(B) Literacy rate of the elderly.
(C) Child survival and development.
(D) Total rate of urbanization.

78. Which of the following is a "Double Burden" in the Indian health context?
(A) Managing two dependent children in a single household.
(B) High cumulative costs of two different medications.
(C) Using dual public and private transport modes to clinics.
(D) Co-existence of infectious and lifestyle diseases.

79. Safe drinking water is essential to prevent:
(A) Water-borne diseases like Typhoid.
(B) Type 1 Diabetes.
(C) Communicable respiratory diseases.
(D) Road traffic accidents.

80. In rural India, a Sub-centre is managed by:
(A) A specialist surgeon and nursing team.
(B) At least one ANM and one male health worker.
(C) A medical officer and four paramedics.
(D) The local village Sarpanch managing clinical care.

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81. Which of the following is a major health indicator measured by NFHS?
(A) National industrial output.
(B) Total Fertility Rate (TFR).
(C) Consumer price index.
(D) Total pharmaceutical exports.

82. Which of the following is a challenge in urban health?
(A) Pollution and lifestyle-related NCDs.
(B) Total lack of healthcare facilities.
(C) Higher rates of physical exercise.
(D) Absence of any local private pharmacies.

83. The primary reason for high IMR in rural areas is:
(A) Excess of pediatric specialists.
(B) Lack of traditional healing methods.
(C) Inadequate neonatal and maternal nutrition.
(D) Universal use of modern medicines.

84. POSHAN Abhiyaan targets:
(A) Male senior citizens in urban districts.
(B) Full-time government school teachers in towns.
(C) Urban corporate and industrial employees.
(D) Adolescents, pregnant women, and lactating mothers.

85. Which of the following is a factor contributing to the rural-urban health divide?
(A) Uniformly equal distribution of hospital beds in India.
(B) Large-scale migration of rural patients to foreign lands.
(C) Concentration of private providers in urban centers.
(D) Uniformity of the climatic conditions across the nation.

86. Wasting in children is primarily a sign of:
(A) Long-term genetic issues affecting adult height.
(B) Acute nutritional deficiency or recent illness.
(C) Excess consumption of dietary supplements.
(D) Over-performance of physical school exercises.

87. Which of the following is NOT a communicable disease?
(A) TB
(B) Diarrhea
(C) Malaria
(D) Hypertension

88. The role of an ANM is most crucial in:
(A) Rural maternal and child health services.
(B) Urban private corporate medical hospitals.
(C) National pharmaceutical laboratory research.
(D) Surgical intensive care units in the city.

89. Health seeking behavior is often delayed in rural India due to:
(A) Over-dependence on health insurance.
(B) Exceptionally high health literacy rates.
(C) Dependence on traditional healers and high cost.
(D) High disposable income of agricultural laborers.

90. Which of the following is an objective of the Mid-Day Meal Scheme?
(A) Improving nutritional status for classes I-VIII.
(B) Reducing the cost of school uniforms.
(C) Providing free employment to teachers.
(D) Promoting the sale of packaged fast food items.

91. BPL populations are more vulnerable to diseases because of:
(A) High usage of preventive care services.
(B) Excessive nutritional intake.
(C) Attendance at regular private medical health checkups.
(D) Poor living conditions and lack of clean water.

92. Which of the following is an example of the "Double Burden of Disease"?
(A) Gaining height while simultaneously losing body weight.
(B) High rates of malaria alongside rising obesity.
(C) Hospital facilities possessing two separate entrances.
(D) Medical doctors working two distinct hospital shifts.

93. The "Poverty-Disease Cycle" can be broken by:
(A) Significantly increasing the cost of daily hospital stay.
(B) Reducing the total number of local PHCs in operation.
(C) Universal and affordable healthcare provision.
(D) Intentionally ignoring the sanitation levels in slums.

94. Which of the following is an indicator of the quality of maternal health services?
(A) Maternal literacy rates.
(B) Frequency of urban flooding.
(C) Female labor force participation.
(D) Institutional delivery rate.

95. In the context of NFHS-5, what has been the trend in institutional births?
(A) Significant increase in medical facility births.
(B) Universal decrease in hospital delivery rates.
(C) Stagnant birth patterns since the NFHS-1 report.
(D) Trend limited exclusively to urban metropolitan areas.

96. Which health worker is primarily responsible for maintaining the "Eligible Couple Register" in a village?
(A) District Magistrate
(B) ANM
(C) Specialist Surgeon
(D) Pharmacist

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97. Anemia in children is often linked to:
(A) Excessive height growth relative to peer groups.
(B) Iron deficiency and worm infestations.

(C) High daily intake of fresh leafy vegetables.
(D) Living in high-altitude mountain environments.

98. Which of the following is a component of the Swachh Bharat Mission's impact on health?
(A) Reduction in stunting due to better sanitation.
(B) Universal increase in urban air pollution levels.
(C) Increase in total medical college institution counts.
(D) Systematic reduction in the number of urban parks.

99. The "Doctor-Population Ratio" is a measure of:
(A) The number of hospitals per doctor.
(B) Average salary of healthcare physicians.
(C) Healthcare human resource availability.
(D) The size of a doctor's clinical practice.

100. Which of the following is a major challenge for the Jal Jeevan Mission in rural areas?
(A) Total lack of household demand for water access.
(B) Excessive rainfall occurring in all parts of India.
(C) Complete absence of any rural population groups.
(D) Sustainability and maintenance of infrastructure.

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ANSWERS

1. (C) 1 and 3 only
Disparities in health infrastructure and outcomes between rural and urban sectors remain a significant challenge in the national healthcare system. Rural populations frequently encounter severe shortages of specialist doctors and limited access to secondary or tertiary facilities. These geographical inequities result in divergent mortality rates and uneven distribution of essential medical resources across different regions in the country.

2. (A) Disparities in healthcare access, infrastructure, and outcomes.
The analysis of the rural-urban health divide in India focuses on the significant gaps in accessibility to medical services, the availability of infrastructure, and overall health statistics. Urban centers typically benefit from concentrated resources and advanced facilities, whereas rural areas often struggle with limited providers. This overview helps policymakers identify specific regions requiring urgent interventions to achieve national health equity.

3. (C) Preference for urban lifestyle and superior infrastructure.
A primary factor contributing to the low doctor-population ratio in rural India is the overwhelming preference among medical professionals for urban environments. Cities offer superior living standards, better educational facilities for families, and more advanced medical infrastructure for professional growth. This urban-centric concentration leaves many rural primary health centers understaffed, complicating the delivery of essential healthcare to village populations.

4. (C) A is true but R is false.
Community Health Centres are strategically positioned to serve as the first referral unit for rural populations, providing essential surgical and specialized services. Conversely, Primary Health Centres are primarily designed for basic healthcare and preventive services rather than complex surgeries. This functional distinction ensures a tiered approach where simple cases are managed locally while more complex complications are referred appropriately.

5. (C) Most tertiary care beds are located in rural community centers.
Tertiary care beds, which are necessary for advanced medical treatments and specialized surgeries, are overwhelmingly concentrated in urban metropolitan hospitals rather than rural areas. This centralization of specialized infrastructure forces rural patients to travel long distances for critical care. While public primary health centers provide basic beds, they lack the sophisticated equipment found in urban tertiary healthcare institutions.

6. (B) Primary Health Centre : 30,000 population in plains
Public health infrastructure follows specific population norms to ensure equitable distribution of services across the country. In plain areas, a Primary Health Centre is designed to serve approximately thirty thousand people. This structure facilitates the delivery of basic medical services and acts as a vital link between grassroots health workers and more specialized secondary care facilities at blocks.

7. (A) P-2, Q-3, R-4, S-1
Healthcare facilities in plain areas are established based on specific population thresholds to maximize coverage and resource efficiency.
Population Benchmarks:
   P. Sub-centres are designed for groups of five thousand people.
   Q. Primary Health Centres serve thirty thousand residents.
   R. Community Health Centres cover one lakh twenty thousand people.
   S. ASHA workers serve one thousand individuals.

8. (A) Performing major surgical procedures at the village level.
Accredited Social Health Activists serve as community health educators and facilitators

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rather than medical professionals. Their responsibilities include raising awareness about nutrition, escorting pregnant women to hospitals, and providing basic first aid. They are not trained or authorized to perform major surgical procedures, which are strictly reserved for qualified specialists in secondary or tertiary healthcare facilities.

9. (C) Providing immunization, prenatal, and postnatal care.
Auxiliary Nurse Midwives play a pivotal role in the rural healthcare system by delivering essential maternal and child health services. They are primarily responsible for administering immunizations, providing prenatal checkups, and ensuring postnatal care for mothers in their communities. Their work at the grassroots level is fundamental to reducing maternal and infant mortality rates through localized and accessible care.

10. (A) Both A and R are true and R is the correct explanation of A.
Inhabitants of urban slums frequently experience inferior health outcomes compared to the general urban population. High population density and the absence of adequate sanitation infrastructure create an environment conducive to the rapid transmission of communicable diseases. These suboptimal living conditions exacerbate health risks, making residents more vulnerable to infections and hindering effective disease control and prevention within these communities.

11. (A) 1 and 2 only
Migration introduces specific health challenges as workers often reside in unhygienic environments that increase vulnerability to infectious diseases. Furthermore, moving between regions can disrupt the continuity of care for chronic conditions like diabetes or tuberculosis. Although migrants face these risks, they are not automatically granted urban health insurance, which further complicates their ability to access affordable healthcare services.

12. (B) Anemia prevalence in women and children.
The National Family Health Survey-5 is a comprehensive data collection effort that tracks critical health and nutrition indicators across the country. A major focus of this survey is measuring anemia prevalence among women and children, which serves as a key marker for nutritional health. The data gathered helps the government formulate targeted strategies like the Anemia Mukt Bharat initiative.

13. (A) P-2, Q-1, R-4, S-3
Mortality indicators provide vital insights into a nation's public health status and the effectiveness of medical interventions.
Health Definitions:
P. Infant mortality measures deaths within the first year of life.
Q. Maternal mortality tracks deaths per hundred thousand live births.
R. Under-five mortality counts deaths before age five.
S. Neonatal mortality records deaths within the first twenty-eight days.

14. (D) Low height for age.
Stunting is a primary indicator of chronic malnutrition, reflecting a failure to reach linear growth potential due to long-term nutritional deficits or repeated infections. It is specifically defined as having a low height relative to one's age. This condition often results in permanent physical and cognitive impairments, highlighting the need for sustained nutritional support during a child's early developmental years.

15. (A) It has shown a declining trend.
Data from the National Family Health Survey-5 indicates a positive shift in child survival, with the infant mortality rate showing a general decline compared to previous years. This downward trend is attributed to improved maternal healthcare, increased institutional deliveries, and expanded immunization coverage. Despite this progress, significant efforts are still required to eliminate regional disparities and further reduce mortality.

16. (A) Both A and R are true and R is the correct explanation of A.
POSHAN Abhiyaan is a multi-ministerial mission aimed at reducing the prevalence of stunting, anemia, and low birth weight. It prioritizes the first thousand days of a child's life as a vital window for nutritional interventions. This period is crucial for cognitive and physical development, ensuring that timely support leads to long-term improvements in health and future productivity.

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17. (B) Nutritional support and school attendance.
The Mid-Day Meal Scheme is a critical intervention that addresses both educational and nutritional needs of children in government schools. By providing a free, cooked meal, the program improves the nutritional intake of students and encourages regular school attendance. This dual approach helps combat classroom hunger and supports the healthy development of children from economically disadvantaged backgrounds across India.

18. (A) Anemia
Anemia is a common medical condition characterized by a deficiency of healthy red blood cells or hemoglobin, which reduces the blood's ability to carry oxygen. It is highly prevalent among Indian women and children, often resulting from iron deficiency or poor nutrition. Addressing this condition is essential because it causes fatigue, weakness, and can complicate pregnancy and child development.

19. (A) P-2, Q-1, R-3, S-4
Malnutrition manifests in several distinct forms, each indicating specific nutritional gaps or health issues within a population.
Types of Malnutrition:
P. Wasting represents acute malnutrition marked by low weight-for-height.
Q. Stunting indicates chronic malnutrition via low height-for-age.
R. Obesity involves excessive fat accumulation.
S. Undernutrition refers to a general deficit in required caloric intake for healthy growth.

20. (D) Poverty causing illness which triggers further financial loss.
The cycle of poverty and disease illustrates the reciprocal relationship between economic status and health. Individuals living in poverty are more susceptible to illness due to poor nutrition and living conditions. Once sick, they face high treatment costs and lost wages, which further depletes their financial resources. This reinforcing loop prevents socioeconomic advancement and traps families in chronic hardship.

21. (A) 1 and 2 only
Families living below the poverty line face significant barriers in accessing quality healthcare services. High out-of-pocket expenses often force these households into debt, while limited awareness regarding government health schemes prevents them from utilizing available support. Although public facilities exist, the financial burden and lack of information remain major obstacles to achieving universal health coverage for the most vulnerable.

22. (A) Both A and R are true and R is the correct explanation of A.
Open defecation remains a critical public health concern in rural areas as it significantly contributes to the high incidence of diarrheal diseases. This practice facilitates the contamination of soil and water sources with fecal pathogens, which are then transmitted to humans. Improving sanitation through toilet construction and behavioral change is essential for reducing environmental pollution and protecting health.

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23. (D) Achieving Open Defecation Free (ODF) status.
A central objective of the Swachh Bharat Mission (Gramin) is to achieve open defecation free status across rural India. This goal involves the massive construction of household and community toilets to improve sanitation and hygiene. By eliminating open defecation, the mission aims to reduce the transmission of water-borne diseases and enhance the dignity and safety of all rural residents.

24. (A) Reduction in water-borne diseases.
Providing access to safe drinking water in rural areas is a fundamental public health intervention that directly prevents the spread of water-borne illnesses. Contaminated water is a primary vector for diseases like cholera, typhoid, and various diarrheal infections. By ensuring clean water supply, communities can significantly lower their disease burden, improve child survival, and reduce healthcare-related expenditures.

25. (A) P-1, Q-2, R-3, S-4
Various government schemes target specific pillars of public health to improve overall well-being across the nation.
Major Health Programs:
P. Jal Jeevan Mission provides tap water connections.

Q. Swachh Bharat focuses on sanitation and hygiene.
R. POSHAN Abhiyaan addresses maternal and child nutrition.
S. Mid-Day Meal offers nutritional support within schools.

26. (A) Tuberculosis
Tuberculosis remains one of the most significant communicable disease challenges in rural India, requiring sustained medical attention and public health resources. The disease spreads easily in crowded or poorly ventilated conditions and often affects those with compromised immune systems. Effective management requires early diagnosis, consistent treatment adherence, and robust community awareness programs to reduce transmission and improve patient outcomes.

27. (D) Simultaneous prevalence of communicable and NCDs.
The double burden of disease refers to a public health situation where a population faces the simultaneous challenge of infectious diseases and non-communicable lifestyle conditions. While India continues to battle communicable diseases like tuberculosis and malaria, there is a rising prevalence of chronic issues such as diabetes and hypertension. This complex health landscape requires a multifaceted healthcare response and strategy.

28. (A) Both A and R are true and R is the correct explanation of A.
Rapid urbanization in India is closely linked to an increasing burden of non-communicable diseases such as diabetes and hypertension. Modern city living often involves sedentary work environments and shifts toward processed dietary patterns, which contribute to obesity and metabolic disorders. Addressing these lifestyle changes through public health awareness and urban planning is essential to mitigate this rising health crisis.

29. (C) Proximity and cost of professional healthcare.
In rural India, health-seeking behavior is heavily influenced by the physical distance to medical facilities and the associated costs of treatment. High travel expenses and the price of medicines often discourage individuals from seeking timely care. When professional healthcare is unaffordable or too far away, many residents rely on local traditional healers, which can delay necessary medical interventions.

30. (D) Financial catastrophe and family impoverishment.
High out-of-pocket health expenditure in India often leads to severe financial distress for low-income households. When families must pay directly for expensive surgeries, chronic medications, or hospitalizations, they may be forced to sell assets or take high-interest loans. This economic burden frequently pushes families below the poverty line, illustrating the urgent need for expanded health insurance and affordable care.

31. (A) P-1, Q-2, R-3, S-4
Health services are delivered through a hierarchical structure involving different personnel and institutions at various administrative levels.
Service Delivery Tiers:
P. ASHA workers provide essential community-based care at the village level.
Q. ANMs manage basic clinical services at the Sub-centre level.
R. Community Health Centres operate at the block level for referrals.
S. District Hospitals provide comprehensive healthcare.

32. (B) High prevalence of respiratory infections due to overcrowding.
Health problems in urban slums are exacerbated by overcrowded living conditions and inadequate housing infrastructure. These environments facilitate the rapid spread of respiratory infections and other communicable diseases among residents. The lack of proper ventilation and sanitation further compounds these risks, making the improvement of living standards a critical priority for public health interventions in metropolitan slum areas.

33. (D) 1, 2, and 3
The Jal Jeevan Mission is a significant national initiative aimed at providing functional household tap connections to every rural home by 2024. This program is vital for public health, as access to safe drinking water drastically reduces the incidence of diarrheal and other water-borne

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diseases. It represents a comprehensive effort to improve the quality of life and health.

34. (A) Hyperactivity
Malnutrition is a broad category that includes several specific conditions related to an imbalance in nutrient intake. Key classifications include stunting, which is low height-for-age, and wasting, which is low weight-for-height. Obesity is also a form of malnutrition involving overnutrition. Hyperactivity, however, is a behavioral or neurodevelopmental condition and is not classified as a primary type of malnutrition.

35. (C) Actions taken for health maintenance or treatment.
Health-seeking behavior encompasses the various actions individuals take to maintain their well-being or to find relief when they are ill. This includes choosing between different types of healthcare providers, adhering to treatment plans, and practicing preventive measures. Factors like socio-economic status, cultural beliefs, and the availability of services significantly shape how and when people seek medical assistance.

36. (D) Medicines and professional outpatient consultations.
In the Indian context, the majority of out-of-pocket health expenditure is directed toward the purchase of medicines and fees for outpatient consultations. These recurring costs can be particularly burdensome for families managing chronic illnesses or frequent minor ailments. Reducing these expenses through the provision of generic drugs and subsidized primary care is a key strategy for financial protection.

37. (C) It reflects risks of death in pregnancy and childbirth.
The maternal mortality rate is a critical indicator that measures the risk of death associated with pregnancy and childbirth within a specific population. It is usually expressed as the number of maternal deaths per hundred thousand live births. High rates often signal deficiencies in emergency obstetric care, poor maternal nutrition, and limited access to skilled birth attendants during delivery.

38. (B) Malaria — Non-communicable disease
Malaria is a communicable disease caused by parasites transmitted through the bites of infected mosquitoes. It is not a non-communicable disease, which refers to chronic conditions like hypertension or diabetes that are not spread through infectious agents. Differentiating between these disease categories is essential for public health planning, as they require vastly different prevention, control, and treatment strategies.

39. (D) National Nutrition Mission
POSHAN Abhiyaan, also known as the National Nutrition Mission, is the flagship program of the Government of India to improve nutritional outcomes. It employs a comprehensive approach to address undernutrition, stunting, and anemia among vulnerable groups like children and pregnant women. The mission integrates various departments to ensure a synergistic response to the complex challenge of malnutrition across the nation.

40. (B) 2—1—3
The rural healthcare structure is organized in a hierarchy based on the population size served by each facility in plain areas. Sub-centres are the smallest units, typically serving five thousand people. Primary Health Centres are the next level, covering thirty thousand residents, while Community Health Centres serve larger groups of approximately one lakh twenty thousand people as referral units.

41. (C) Lack of social support and poor living conditions.
Migrants moving from rural to urban areas often face significant health risks due to the loss of their traditional social support networks. In cities, they frequently live in congested, unhygienic environments with limited access to clean water or sanitation. These poor living conditions, combined with the stress of relocation, make them highly vulnerable to both infectious and lifestyle-related diseases.

42. (A) Low weight for height.
Wasting is a critical indicator of acute malnutrition, occurring when a child's weight is significantly low relative to their height. This condition often results from a recent period of

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severe nutritional deficit or a bout of infectious disease. It requires immediate medical and nutritional intervention to prevent serious health complications and to ensure the child can regain a healthy weight.

43. (D) Referral centre for PHCs with specialist consultations.
Community Health Centres function as the secondary tier of the rural healthcare system, serving as essential referral units for Primary Health Centres. They are designed to provide more advanced medical care, including specialist consultations in surgery, pediatrics, and obstetrics. By offering these higher-level services at the block level, they bridge the gap between basic care and district-level hospitals.

44. (B) 1 and 3 only
The Swachh Bharat Mission-Gramin focuses on sustaining sanitation gains and managing solid-liquid waste effectively. Access to improved sanitation directly impacts the health of young children by reducing exposure to soil-transmitted parasites and fecal pathogens. These interventions are crucial for lowering child mortality rates and preventing stunted growth, as a clean environment promotes better nutrient absorption and physical development.

45. (C) Reduction of the number of medical colleges in India.
POSHAN Abhiyaan is dedicated to enhancing nutritional outcomes through targeted goals, such as reducing stunting, undernutrition, and anemia. Its objectives are centered on improving the health of mothers and children to ensure a stronger future generation. Reducing the number of medical colleges is not an objective; rather, the mission focuses on improving health service delivery and community awareness.

46. (C) Both statements are correct.
The distribution of medical professionals in India shows a clear tilt toward urban areas, resulting in a more favorable doctor-population ratio in cities compared to villages. To address rural needs, the government relies on a three-tier healthcare delivery system consisting of Sub-centres, Primary Health Centres, and Community Health Centres. This structured approach aims to provide accessible and tiered medical services.

47. (A) Under-5 Mortality — Deaths before age five.
The under-five mortality rate is a fundamental indicator of child survival, representing the probability of a child dying before their fifth birthday. This metric reflects the impact of nutritional status, environmental conditions, and the quality of pediatric healthcare services. Monitoring this rate is essential for evaluating the success of public health programs aimed at protecting the most vulnerable children.

48. (B) Public infrastructure growth and financial protection.
Improving healthcare access for the population living below the poverty line requires a combination of strengthening public health infrastructure and providing financial protection. Expanding the network of primary health centers ensures that care is physically reachable, while health insurance schemes help mitigate out-of-pocket costs. These strategies work together to prevent medical expenses from causing further impoverishment among low-income families.

49. (B) Locally selected resident woman from the community.
Accredited Social Health Activists are selected from within their own communities to ensure they have the trust and cultural understanding of the local population. These resident women serve as a bridge between the formal health system and the community, facilitating access to medical services. Their local presence makes them highly effective in promoting hygiene, nutrition, and institutional delivery among neighbors.

50. (A) 2—3—1
The rural healthcare delivery system operates through a structured referral chain that starts at the grassroots level. Patients initially access basic care at the Sub-centre, which serves as the most local point of contact. For more complex issues, they are referred to the Primary Health Centre, followed by the Community Health Centre for specialized medical consultations and secondary care.

51. (C) Lack of financial resources for nutrition and care.
The cycle of poverty and disease is primarily driven by a lack of financial resources, which limits access to adequate nutrition and healthcare.

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Poor individuals often cannot afford a balanced diet or timely medical treatment, leading to frequent illnesses. These health problems then reduce their ability to work, further entrenching them in poverty and creating a difficult-to-break downward spiral.

52. (D) Non-communicable diseases like diabetes and heart issues.
In urban India, there is a noticeable increase in the prevalence of non-communicable diseases such as diabetes and cardiovascular conditions. This shift is largely attributed to lifestyle changes, including more sedentary habits and a higher consumption of processed foods. Managing this rising burden requires a focus on preventive measures, early diagnosis, and promoting healthier habits within the growing urban population.

53. (C) Providing basic maternal and child health services.
The Sub-centre serves as the peripheral outpost of the public health system, primarily focusing on maternal and child health. Staffed by Auxiliary Nurse Midwives and male health workers, these centers provide essential services such as immunization, family planning, and prenatal care. Their location within the community ensures that these basic but vital health interventions are easily accessible to rural residents.

54. (B) Cholera
Open defecation is a major risk factor for the spread of water-borne diseases like cholera, as it leads to the fecal contamination of water sources. Pathogens from human waste can easily enter the water supply, causing rapid outbreaks of severe diarrheal illness in the community. Implementing proper sanitation and promoting toilet use are essential steps to eliminate these preventable infections.

55. (D) Child nutrition and mortality indicators.
The National Family Health Survey-5 is a vital source of data for understanding the health landscape of India. It provides detailed information on various indicators, including child nutrition levels and mortality rates. This data is used by the government and health organizations to monitor the progress of existing programs and to identify areas where new public health interventions are needed.

56. (A) Pregnancy and first two years for optimal growth.
The thousand-day window recognized by POSHAN Abhiyaan covers the period from the start of pregnancy until a child's second birthday. This timeframe is critical for optimal physical growth and cognitive development. Nutritional interventions during this stage are far more effective in preventing long-term damage from malnutrition, making it the most important period for ensuring a child's future health.

57. (C) They are usually male health workers.
Auxiliary Nurse Midwives are key female health workers based at Sub-centres who provide vital maternal and child health services. Their roles include administering immunizations and providing antenatal care to pregnant women within their local communities. While there are male health workers in the system, the ANM position is traditionally and primarily held by women to facilitate comfort and trust.

58. (A) Access issues due to lack of local identity proof.
Migrant workers often face significant barriers to accessing healthcare because they lack local identity documents required for government schemes in their new cities. This administrative hurdle prevents them from utilizing subsidized services, forcing them to rely on expensive private providers or delay treatment. Ensuring the portability of health benefits is essential for protecting the health of this mobile and vulnerable population.

59. (D) Urban doctor surplus while rural areas face shortages.
The rural-urban health divide is characterized by a significant maldistribution of medical personnel, with a high concentration of doctors in urban centers while rural areas face persistent shortages. This imbalance means that village residents often lack access to timely and professional medical care. Addressing this gap requires incentives for rural practice and the expansion of training facilities in underserved regions.

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60. (B) Malaria
Malaria remains a major communicable disease burden in India, particularly in regions with high mosquito activity and limited environmental control. It causes significant morbidity and can be fatal if not treated promptly. Public health efforts focus on vector control, early diagnosis, and effective treatment to reduce the incidence of the disease and protect vulnerable populations from its impact.

61. (C) Medical impoverishment.
High out-of-pocket health expenditure is a primary cause of medical impoverishment in India, where families are forced into poverty due to the cost of healthcare. When individuals must pay for expensive treatments without insurance, their savings are quickly depleted. This financial strain highlights the importance of providing affordable public healthcare and expanding financial protection through various government-sponsored health insurance schemes.

62. (D) Reducing the prevalence of iron deficiency.
The Anemia Mukt Bharat strategy is a focused national effort to reduce the prevalence of anemia across all age groups, with a particular emphasis on iron deficiency. It involves the distribution of iron and folic acid supplements, promoting diverse diets, and controlling worm infestations. By addressing these root causes, the program aims to improve the overall health and energy levels.

63. (A) Significant increase due to government intervention.
Sanitation coverage in rural India has seen a significant increase over recent years due to intensive government interventions like the Swachh Bharat Mission. These programs have focused on building millions of toilets and promoting behavioral change to end open defecation. This improvement in sanitation is directly linked to better public health outcomes and a reduction in the incidence of water-borne diseases.

64. (B) Providing basic indoor and outdoor healthcare services.
Primary Health Centres are the cornerstones of rural healthcare, providing both indoor and outdoor medical services to local populations. They manage a variety of health issues, ranging from basic illnesses to maternal care and minor emergencies. By offering these services at the community level, PHCs reduce the burden on larger hospitals and ensure that essential care is accessible to residents.

65. (B) Chronic undernutrition.
Stunting in children is a reliable measure of chronic undernutrition, indicating that a child has suffered from long-term nutritional deficits during critical growth periods. Unlike wasting, which reflects acute issues, stunting shows the cumulative impact of poor diet and repeated infections over several years. Addressing this condition requires sustained interventions that improve overall nutrition and environmental sanitation for young children.

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66. (A) Government and government-aided schools.
The Mid-Day Meal Scheme is implemented across government and government-aided schools to provide children with a nutritious, cooked meal during the school day. This initiative aims to improve child nutrition, boost enrollment, and ensure better concentration in the classroom. By targeting these educational institutions, the program reaches millions of children from diverse socio-economic backgrounds, supporting their growth and learning.

67. (C) High incidence of vector and respiratory disease.
Urban slums face unique health challenges, including a high incidence of vector-borne and respiratory diseases. Congested living conditions and poor drainage systems create breeding grounds for mosquitoes and facilitate the airborne transmission of infections. Addressing these issues requires targeted urban planning, improved sanitation, and localized healthcare services that can effectively manage and prevent outbreaks within these densely populated communities.

68. (D) To provide tap water to every rural household by 2024.
The primary objective of the Jal Jeevan Mission is to ensure that every rural household in India has access to a functional tap water connection by 2024. This massive infrastructure project is designed to provide safe and adequate drinking

water, which is essential for reducing the burden of water-borne diseases and improving the overall quality of life.

69. (B) Deaths per 1,00,000 live births.
The maternal mortality rate is a standard health indicator expressed as the number of maternal deaths per hundred thousand live births. This specific ratio allows for the comparison of maternal safety across different regions and populations. A lower rate indicates better access to quality obstetric care, skilled birth attendants, and emergency medical services during pregnancy and the childbirth period.

70. (B) Diabetes
Diabetes is a prominent example of a non-communicable disease, which is a chronic condition that does not spread through infectious agents. Unlike communicable diseases like tuberculosis or malaria, NCDs are often linked to genetic factors, environmental conditions, and lifestyle choices. Managing diabetes requires long-term medical care, regular monitoring, and lifestyle adjustments to prevent serious health complications over a patient's life.

71. (D) Under 1 year of age per 1,000 live births.
Infant mortality rate is a standard health indicator reflecting the number of deaths of children under one year of age for every thousand live births. This metric is a sensitive measure of the overall quality of healthcare services, maternal health, and socioeconomic conditions. Higher rates often indicate significant gaps in neonatal care, nutrition, and essential immunization services within the community.

72. (A) Secondary healthcare and referral center for PHCs.
In the rural healthcare hierarchy, the Community Health Centre serves as a critical provider of secondary healthcare and acts as the first referral unit for Primary Health Centres. CHCs are equipped with specialized medical staff and facilities to handle more complex cases that cannot be managed at the primary level. This structure ensures that specialized care is accessible at the block.

73. (C) Increasing the total number of medical colleges.
The Swachh Bharat Mission is focused on improving sanitation through the eradication of open defecation, the elimination of manual scavenging, and better solid waste management. Its primary goals are related to environmental hygiene and behavioral change to promote healthy practices. Increasing the number of medical colleges is a separate educational and health policy objective and not a direct goal of this mission.

74. (A) Accredited Social Health Activist.
ASHA stands for Accredited Social Health Activist, representing a vital group of community health workers in India's public health system. These trained individuals act as health educators and facilitators, connecting their local communities with essential medical services. Their work is fundamental to improving maternal and child health, promoting hygiene, and ensuring that government health programs reach the most remote households.

75. (C) Both undernutrition and overnutrition.
Malnutrition is a comprehensive term that encompasses both undernutrition and overnutrition. Undernutrition includes conditions like stunting and wasting caused by a lack of essential nutrients, while overnutrition, such as obesity, results from an excessive intake of certain nutrients. Both forms represent significant public health challenges in India, requiring diverse strategies to ensure balanced nutrition and healthy lifestyles for everyone.

76. (B) Direct individual payments to healthcare providers.
Out-of-pocket expenditure refers to the direct payments that individuals and families make to healthcare providers at the time of service. This includes costs for doctor consultations, diagnostic tests, and medications that are not covered by insurance or public funding. High levels of this expenditure can place a heavy financial burden on households, often leading to debt or the avoidance of care.

77. (C) Child survival and development.
The under-five mortality rate serves as a broad indicator of child survival and general

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developmental health within a population. It reflects the impact of various factors, including the quality of prenatal care, access to immunizations, and the prevalence of childhood diseases. Monitoring this rate helps health officials identify risks and implement targeted interventions to protect the health of young children.

78. (D) Co-existence of infectious and lifestyle diseases.
The double burden of disease in the Indian context refers to the simultaneous prevalence of infectious diseases alongside rising rates of lifestyle-related, non-communicable conditions. This dual challenge places a massive strain on the healthcare system, as it must maintain traditional disease control programs while also expanding services for chronic issues like diabetes. Addressing this burden requires a comprehensive and well-integrated public health strategy.

79. (A) Water-borne diseases like Typhoid.
Access to safe drinking water is a critical preventive measure against water-borne diseases such as typhoid and cholera. Contaminated water sources can quickly spread pathogens through a community, leading to severe outbreaks and increased mortality, particularly among children. Ensuring a clean water supply through infrastructure development and effective treatment is essential for maintaining public health and reducing the overall disease burden.

80. (B) At least one ANM and one male health worker.
In rural India, a Sub-centre is typically managed by a team consisting of at least one Auxiliary Nurse Midwife and one male health worker. This staffing structure is designed to provide basic primary care and maternal-child health services directly to the local community. By operating at the grassroots level, these workers ensure that essential medical interventions and health education are accessible.

81. (B) Total Fertility Rate (TFR).
The National Family Health Survey measures several critical health and demographic indicators, with the total fertility rate being one of its primary focuses. TFR provides insights into population growth trends and the effectiveness of family planning programs. This data is essential for long-term national planning, helping the government allocate resources for education, healthcare, and infrastructure based on projected population changes.

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82. (A) Pollution and lifestyle-related NCDs.
Urban health faces significant challenges from environmental pollution and the rising prevalence of lifestyle-related non-communicable diseases. Poor air quality in cities contributes to respiratory issues, while sedentary urban lifestyles and dietary changes increase the risk of chronic conditions like heart disease. Addressing these urban-specific health risks requires a combination of environmental regulations, public awareness campaigns, and improved healthcare services in cities.

83. (C) Inadequate neonatal and maternal nutrition.
A primary cause of the high infant mortality rate in rural areas is inadequate nutrition for both mothers and neonates. Poor maternal health during pregnancy can lead to low birth weight and other complications that increase an infant's vulnerability. Ensuring access to balanced diets and specialized prenatal care is essential for improving child survival rates and promoting healthy development in rural communities.

84. (D) Adolescents, pregnant women, and lactating mothers.
POSHAN Abhiyaan strategically targets vulnerable groups including adolescents, pregnant women, and lactating mothers to improve national nutritional standards. By focusing on these specific demographics, the mission aims to break the intergenerational cycle of malnutrition. Providing these groups with essential nutrients and health education ensures better outcomes for both the mothers and their children, leading to a healthier future population.

85. (C) Concentration of private providers in urban centers.
One factor contributing to the rural-urban health divide is the high concentration of private healthcare providers in urban centers. Private hospitals and specialists are often drawn to cities due to better financial prospects and superior infrastructure. This concentration leaves rural

areas with limited options, forcing residents to rely on overburdened public facilities or travel long distances to access specialized medical care.

86. (B) Acute nutritional deficiency or recent illness.
Wasting in children is a clinical sign of acute nutritional deficiency or the impact of a recent, severe illness. It represents a rapid loss of weight or a failure to gain weight properly relative to height. Unlike chronic stunting, wasting requires immediate nutritional support and medical attention to prevent severe health consequences and to help the child recover quickly to a healthy state.

87. (D) Hypertension
Hypertension is a non-communicable disease, meaning it is a chronic condition that is not spread from one person to another through infectious agents. In contrast, diseases like tuberculosis, diarrhea, and malaria are communicable and can be transmitted through various pathways. Understanding this distinction is vital for public health, as the strategies for preventing and managing chronic lifestyle conditions differ significantly from those used for infectious diseases.

88. (A) Rural maternal and child health services.
The role of an Auxiliary Nurse Midwife is most crucial in the delivery of maternal and child health services within rural communities. Working at the Sub-centre level, they provide essential care such as vaccinations, prenatal checkups, and health education to families. Their localized presence is a key factor in improving health indicators and ensuring that the public healthcare system reaches remote areas.

89. (C) Dependence on traditional healers and high cost.
Health-seeking behavior in rural India is often delayed due to a combination of reliance on local traditional healers and the high costs associated with professional medical care. Many individuals first seek informal treatments that may be more familiar or cheaper, only turning to formal hospitals when their condition worsens. This delay can lead to more severe health complications and higher eventual treatment costs.

90. (A) Improving nutritional status for classes I-VIII.
A primary objective of the Mid-Day Meal Scheme is to improve the nutritional status of children enrolled in classes one through eight in government schools. By providing a hot, nutritious meal daily, the program addresses childhood hunger and supports healthy physical and cognitive development. This initiative also encourages regular school attendance and helps bridge the nutritional gap for children from low-income families.

91. (D) Poor living conditions and lack of clean water.
Populations living below the poverty line are more vulnerable to diseases due to their challenging living conditions and limited access to clean water. Overcrowded housing and poor sanitation facilitate the spread of infections, while the lack of safe water leads to frequent water-borne illnesses. Improving these environmental factors is essential for reducing the disease burden and improving the health of the most vulnerable.

92. (B) High rates of malaria alongside rising obesity.
An example of the double burden of disease in India is the persistence of high rates of malaria alongside a rising prevalence of obesity. This situation illustrates how the country must simultaneously manage traditional infectious diseases and modern lifestyle-related health issues. This complexity requires a versatile healthcare system that can provide both acute infectious disease control and long-term management for chronic metabolic conditions.

93. (C) Universal and affordable healthcare provision.
The poverty-disease cycle can be effectively broken by ensuring that healthcare is both universal and affordable for all citizens. When individuals can access medical services without facing financial ruin, they are more likely to seek timely care and stay healthy. This health stability allows them to maintain their productivity and livelihoods, eventually helping families escape the economic trap created by frequent illnesses.

94. (D) Institutional delivery rate.
The institutional delivery rate is a key indicator of the quality and reach of maternal health services. It measures the proportion of births that occur in medical facilities under the supervision of skilled

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professionals. Increasing this rate is a major public health goal, as hospital births significantly reduce the risk of complications and mortality for both the mother and the newborn during childbirth.

95. (A) Significant increase in medical facility births.
Data from the National Family Health Survey-5 shows a significant increase in the rate of institutional births across India. This positive trend indicates that more families are choosing to deliver their babies in hospitals rather than at home. This shift toward medical facility births is a major factor in the national efforts to reduce maternal and infant mortality rates through professional care.

96. (B) ANM
The Auxiliary Nurse Midwife is the health worker primarily responsible for maintaining the Eligible Couple Register at the village level. This register tracks couples of reproductive age to help in the planning and delivery of family planning and maternal health services. By keeping these records updated, the ANM ensures that essential reproductive health information and support are provided to those who need it most.

97. (B) Iron deficiency and worm infestations.
Anemia in children is frequently linked to a combination of iron deficiency in their diet and the presence of worm infestations. Parasitic worms can cause internal blood loss and interfere with the absorption of vital nutrients, exacerbating the impact of poor nutrition. Programs that combine iron supplementation with regular deworming are essential for effectively reducing anemia and improving the overall health of children.

98. (A) Reduction in stunting due to better sanitation.
The Swachh Bharat Mission has a significant positive impact on child health by contributing to a reduction in stunting through improved environmental sanitation. Better hygiene and the elimination of open defecation reduce the incidence of diarrheal diseases and parasitic infections. This cleaner environment allows children's bodies to better absorb nutrients, leading to improved linear growth and a lower prevalence of chronic undernutrition.

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99. (C) Healthcare human resource availability.
The doctor-population ratio is a fundamental metric used to measure the availability of human resources in the healthcare system. It indicates how many doctors are available for a specific number of residents, highlighting potential shortages or surpluses in medical personnel. Monitoring this ratio is essential for workforce planning and for ensuring that all regions of the country have enough professionals to meet health needs.

100. (D) Sustainability and maintenance of infrastructure.
A major challenge for the Jal Jeevan Mission in rural areas is ensuring the long-term sustainability and maintenance of the newly built water infrastructure. While installing tap connections is a vital first step, keeping the water flowing reliably requires ongoing technical upkeep and community participation. Addressing these maintenance needs is essential for the program to achieve its goal of providing safe water to all households permanently.

CHAPTER 04
Social Determinants of Health

1. Social determinants of health are primarily defined as:
(A) The genetic predispositions inherited by individuals at birth.
(B) The conditions in which people are born, grow, live, work, and age.
(C) The availability of experimental gene therapies in tertiary care.
(D) The individual choices regarding diet and physical exercise.

2. Read the following statements and select the correct option:
Statement I: Higher economic status is consistently associated with better health outcomes across different populations.
Statement II: Economic status only impacts health through the ability to purchase expensive medical insurance.
(A) Both Statement I and Statement II are correct.
(B) Statement I is correct but Statement II is incorrect.
(C) Statement I is incorrect but Statement II is correct.
(D) Both Statement I and Statement II are incorrect.

3. Which of the following best describes the "poverty-ill health" cycle?
(A) High disposable income leading to a rise in lifestyle-related chronic diseases.
(B) Disease leading to increased government spending on public health infrastructure.
(C) Economic deprivation causing illness, which in turn reduces earning potential.
(D) Low education levels leading to a generalized lack of interest in clinical medicine.

4. Read the following lists and select the correct answer using the codes given below:
List I: (Concept)
P. Income Inequality
Q. Health Literacy
R. Social Capital
S. Occupational Hazard
List II: (Description)
1. The ability to obtain, process, and understand basic health information
2. The gap in wealth distribution within a population
3. Risks to health inherent in a person's place of work
4. Social networks and norms of reciprocity within a community
(A) P-2, Q-1, R-4, S-3
(B) P-1, Q-2, R-3, S-4
(C) P-2, Q-4, R-1, S-3
(D) P-3, Q-1, R-4, S-2

5. Which of the following is NOT a direct mechanism through which education influences health outcomes?
(A) Increasing knowledge about preventive health behaviors.
(B) Improving opportunities for higher-paying, safer employment.
(C) Directly modifying the individual's genetic code at birth.
(D) Enhancing the individual's sense of personal agency and control.

6. A person who can read a prescription but cannot calculate the correct dosage based on their weight is demonstrating a deficit in:
(A) Genetic intelligence
(B) Health literacy
(C) Social capital
(D) Economic status

7. Read the following statements and select the correct option:
Assertion (A): Workers in the unorganized sector in India are more vulnerable to occupational diseases.
Reason (R): The unorganized sector lacks

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stringent implementation of safety regulations and health insurance coverage.
(A) Both A and R are true and R is the correct explanation of A.
(B) Both A and R are true but R is not the correct explanation of A.
(C) A is true but R is false.
(D) A is false but R is true.

8. Silicosis is a common occupational disease found primarily among workers in which of the following industries?
(A) Stone crushing and mining
(B) Information Technology
(C) Banking and Finance
(D) Floriculture

9. Which of the following statements regarding the health impact of child labor is correct?
(A) It accelerates physical growth due to early manual labor.
(B) It has no significant impact on the mental development of the child.
(C) It often results in long-term physical deformities and respiratory issues.
(D) It protects children from lifestyle diseases associated with schools.

10. Consider the following statements regarding gender as a determinant of health:
1. Gender roles often dictate the distribution of food within a household.
2. Women generally have higher access to specialized healthcare in rural India.
3. Masculinity norms can lead to increased risk-taking behaviors among men.

Which of the above statement(s) is/are correct?
(A) 1 and 2 only
(B) 2 and 3 only
(C) 1 and 3 only
(D) 1, 2, and 3

11. "Son preference" in India directly leads to which of the following health outcomes for the girl child?
(A) Higher immunization rates compared to boys.
(B) Increased enrollment in sports-based health programs.
(C) Preferential access to private pediatricians.
(D) Neglect in nutrition and delayed medical treatment.

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12. Which practice best exemplifies nutritional neglect of women in traditional Indian households?
(A) A cultural requirement for women to prepare all family meals.
(B) Women eating last, often consuming the least nutritious portions.
(C) Women being forced to eat more protein than men.
(D) Equal distribution of milk and eggs among all family members.

13. Arrange the following levels of the "poverty-health trap" in the correct logical sequence:
1. Loss of wages due to inability to work
2. Poor living conditions and malnutrition
3. Onset of chronic infectious disease
4. Further descent into deeper poverty

(A) 2-3-1-4
(B) 1-2-3-4
(C) 3-2-1-4
(D) 4-1-2-3

14. Domestic violence against women is considered a social determinant of health because:
(A) It only causes temporary physical bruises.
(B) It is a private matter that does not affect public health statistics.
(C) It is primarily a result of temporary hormonal imbalances.
(D) It leads to long-term psychological trauma and reproductive health issues.

15. Read the following statements and select the correct option:
Assertion (A): Caste-based discrimination can lead to poorer health outcomes for Dalit communities.
Reason (R): Social exclusion can result in restricted access to clean water sources and public health facilities.
(A) Both A and R are true and R is the correct explanation of A.
(B) Both A and R are true but R is not the correct explanation of A.
(C) A is true but R is false.
(D) A is false but R is true.

16. Which of the following is an INCORRECT pair regarding health indicators?
(A) High Income Inequality – Poor population health
(B) Scheduled Tribe Status – Higher than average life expectancy
(C) High Health Literacy – Better treatment adherence
(D) Urban Slum Living – High communicable disease risk

17. Which factor is most responsible for the lower utilization of health services by Scheduled Caste (SC) populations in some rural areas?
(A) Genetic immunity to most common diseases.
(B) Perceived or actual discrimination by healthcare providers.
(C) A cultural preference for high-cost private hospitals.
(D) Geographic proximity to all major specialty centers.

18. Consider the following statements regarding tribal health in India:
1. Tribal populations often face geographic isolation from health centers.
2. There is a high prevalence of genetic disorders like Sickle Cell Anemia in certain tribes.
3. Lack of health providers who speak tribal languages is a barrier to care.

Which of the above statement(s) is/are correct?
(A) 1 and 2 only
(B) 1 and 3 only
(C) 2 and 3 only
(D) 1, 2, and 3

19. Read the following statements and select the correct option:
Assertion (A): Overcrowding in housing is a significant determinant of the spread of tuberculosis (TB).
Reason (R): Close physical proximity and poor ventilation facilitate the transmission of airborne pathogens.
(A) Both A and R are true and R is the correct explanation of A.
(B) Both A and R are true but R is not the correct explanation of A.
(C) A is true but R is false.
(D) A is false but R is true.

20. Read the following lists and select the correct answer using the codes given below:
List I: (Determinant)
P. Urban Slums
Q. Child Labor
R. Son Preference
S. Social Exclusion
List II: (Health Impact)
1. Stunted growth and early disability
2. High incidence of water-borne diseases
3. Reduced access to immunization for girls
4. Delayed health-seeking behavior due to stigma
(A) P-2, Q-1, R-3, S-4
(B) P-1, Q-2, R-3, S-4
(C) P-4, Q-3, R-2, S-1
(D) P-2, Q-3, R-1, S-4

21. Which of the following is a characteristic of urban slum living that negatively affects health?
(A) Abundance of dedicated and well-maintained community green spaces.
(B) High availability of formal rental agreements and land security.
(C) Unclear land tenure resulting in inadequate sanitation facilities.
(D) Universal access to high-quality municipally treated tap water.

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22. Read the following statements and select the correct option:
Statement I: Social capital refers to the resources available to individuals through their social networks.
Statement II: High levels of social capital are usually associated with higher mortality rates in elderly populations.
(A) Both Statement I and Statement II are correct.
(B) Statement I is correct but Statement II is incorrect.
(C) Statement I is incorrect but Statement II is correct.
(D) Both Statement I and Statement II are incorrect.

23. Read the following statements and select the correct option:
Assertion (A): Minority communities may

experience poorer health outcomes due to social exclusion.
Reason (R): Social exclusion can limit access to education, employment, and linguistic-appropriate health information.
(A) Both A and R are true and R is the correct explanation of A.
(B) Both A and R are true but R is not the correct explanation of A.
(C) A is true but R is false.
(D) A is false but R is true.

24. Which religious practice can sometimes act as a positive determinant of health?
(A) Encouraging hygiene rituals and prohibition of alcohol/tobacco.
(B) Prohibiting all forms of modern vaccination.
(C) Promoting community fasting without medical supervision.
(D) Discouraging women from seeking male doctors during emergencies.

25. The concept of "Intersectionality" in health suggests that:
(A) An individual's annual income is the sole predictor of health status.
(B) Health outcomes are determined purely by the biological interaction of human cells.
(C) Overlapping social identities like caste and gender creating unique disadvantages.
(D) Health systems should focus only on emergencies occurring at traffic intersections.

26. Consider the following statements regarding disability as a social determinant:
1. People with disabilities face physical barriers in accessing health facilities.
2. Stigma associated with disability can lead to social isolation and mental health issues.
3. Most healthcare providers are naturally trained in sign language and disability ethics.

Which of the above statement(s) is/are correct?
(A) 1 and 2 only
(B) 2 and 3 only
(C) 1 and 3 only
(D) 1, 2, and 3

27. Arrange the following age groups in order of their typical vulnerability to environmental social determinants, from highest to lowest vulnerability:
1. Healthy Adults (25-45 years)
2. Infants (0-1 year)
3. Elderly (75+ years)

(A) 2-3-1
(B) 1-2-3
(C) 3-2-1
(D) 2-1-3

28. Which of the following is an example of an occupational hazard in the agricultural sector?
(A) Carpal tunnel syndrome from typing.
(B) Pesticide poisoning and heat stroke.
(C) Radiation exposure from X-ray machines.
(D) Hearing loss from jet engine noise.

29. Unemployment is linked to poor health primarily through:
(A) Increased physical activity while searching for jobs.
(B) Better sleep patterns due to lack of work stress.
(C) Increased psychological stress and loss of health insurance.
(D) Lower exposure to outdoor air pollution.

30. Food security as a determinant of health involves which three dimensions?
(A) Taste, Color, and Texture.
(B) Production, Export, and Taxation.
(C) Farming, Milling, and Baking.
(D) Availability, Accessibility, and Affordability.

31. Which of the following is an INCORRECT pair regarding occupational hazards?
(A) Plumbism – Software engineers
(B) Byssinosis – Cotton textile workers
(C) Anthracosis – Coal miners
(D) Asbestosis – Construction workers

32. The phrase "social injustice is killing people on a grand scale" in the context of health refers to:
(A) The rise of infectious diseases in high-income countries.
(B) Inequalities in the conditions in which people live and work.
(C) The lack of advanced cardiovascular research facilities in rural areas.
(D) The natural selection process in human evolution.

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33. Which of the following is a negative consequence of income inequality on population health?
(A) Improved social cohesion.
(B) Erosion of trust and increased social stress.
(C) Uniform distribution of healthcare resources.
(D) Increased average life expectancy for all income groups.

34. Read the following lists and select the correct answer using the codes given below:
List I: (Determinant Category)
P. Economic
Q. Environmental
R. Socio-cultural
S. Occupational
List II: (Specific Factor)
1. Overcrowding in slums
2. Gender-based food distribution
3. Monthly per capita expenditure
4. Exposure to lead in a battery factory
(A) P-3, Q-1, R-2, S-4
(B) P-1, Q-2, R-3, S-4
(C) P-3, Q-4, R-1, S-2
(D) P-2, Q-1, R-4, S-3

35. Which of the following statements about health literacy is INCORRECT?
(A) It includes the ability to navigate the healthcare system.
(B) Low health literacy is linked to higher rates of hospitalization.
(C) It is limited only to the ability to read medical pamphlets.
(D) It is influenced by the level of general education.

36. Reproductive health outcomes for women in India are heavily influenced by:
(A) The architectural style of the local district headquarters.
(B) The distance to the nearest international airport.
(C) The total number of luxury vehicles registered in the state.
(D) Their autonomy in decision-making within the family.

37. Read the following statements and select the correct option:
Assertion (A): The elderly population in India is increasingly vulnerable to health neglect.
Reason (R): Changing family structures and the migration of young adults to cities have weakened traditional support systems.
(A) Both A and R are true and R is the correct explanation of A.
(B) Both A and R are true but R is not the correct explanation of A.
(C) A is true but R is false.
(D) A is false but R is true.

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38. Which of the following best defines "Social Exclusion"?
(A) The voluntary decision of certain individuals to live in total social isolation.
(B) Systematic denial of rights and social resources to specific marginalized groups.
(C) The proactive celebration of cultural and ethnic diversity in modern urban areas.
(D) The inclusive participation of all community members in a local health camp.

39. In the context of occupational health, "Pneumoconiosis" refers to:
(A) A viral infection of the skin.
(B) A psychological disorder related to work stress.
(C) A vitamin deficiency common in office workers.
(D) A group of lung diseases caused by inhalation of dust.

40. Consider the following statements regarding food security:
1. Food security exists when all people have physical and economic access to sufficient food.
2. Nutritional quality is not a part of the food security definition.
3. Chronic food insecurity is directly linked to stunting in children.
Which of the above statement(s) is/are correct?
(A) 1 and 2 only
(B) 2 and 3 only
(C) 1 and 3 only
(D) 1, 2, and 3

41. Which of the following is a major barrier to healthcare access for tribal communities in India?
(A) Excessive supply of specialized doctors in

tribal belts.
(B) High levels of health literacy among tribal youth.
(C) Geographic distance and lack of transportation.
(D) Over-reliance on modern health insurance schemes.

42. Read the following statements and select the correct option:
Statement I: Child labor often results in the deprivation of basic education, which is a long-term determinant of health.
Statement II: Children working in carpet weaving industries are at high risk for eye strain and respiratory issues.
(A) Both Statement I and Statement II are correct.
(B) Statement I is correct but Statement II is incorrect.
(C) Statement I is incorrect but Statement II is correct.
(D) Both Statement I and Statement II are incorrect.

43. Which of the following is a direct health consequence of poor housing conditions?
(A) Improved mental health due to community living.
(B) Decreased risk of domestic accidents.
(C) Lower rates of childhood asthma.
(D) Increased risk of vector-borne diseases like malaria.

44. Read the following lists and select the correct answer using the codes given below:
List I: (Group)
P. Rural Women
Q. Urban Slum Dwellers
R. Elderly
S. Migrant Workers
List II: (Specific Health Challenge)
1. Lack of sanitation and clean water
2. Anemia and lack of reproductive autonomy
3. Lack of portability of health benefits
4. Degenerative diseases and loneliness
(A) P-2, Q-1, R-4, S-3
(B) P-1, Q-2, R-3, S-4
(C) P-2, Q-3, R-1, S-4
(D) P-4, Q-1, R-2, S-3

45. Which concept describes how "poverty leads to poor health and poor health traps people in poverty"?
(A) The Poverty-Ill Health Cycle
(B) The Health Transition
(C) The Demographic Dividend
(D) The Epidemiological Shift

46. Which of the following represents a correct pair?
(A) High Social Capital – Weak community support
(B) Son Preference – Improved sex ratio at birth
(C) Income Inequality – Equal health opportunities
(D) Occupational Disease – Bagassosis (Sugarcane dust)

47. Read the following statements and select the correct option:
Assertion (A): Improving female literacy is a key strategy for reducing infant mortality rates.
Reason (R): Educated mothers are more likely to seek timely immunization and follow better hygiene practices.
(A) Both A and R are true and R is the correct explanation of A.
(B) Both A and R are true but R is not the correct explanation of A.
(C) A is true but R is false.
(D) A is false but R is true.

48. Which of the following is an example of a "competency-based" health literacy task?
(A) Memorizing the names of all human bones.
(B) Reading a thermometer and deciding if a child has a fever.
(C) Knowing the history of the World Health Organization.
(D) Identifying the number of floors in a local hospital.

49. Which factor is a major social determinant of health specifically for the "Elderly" in India?
(A) Early childhood education.
(B) Economic dependency and lack of geriatric care.
(C) Occupational hazards in the software industry.
(D) High rates of maternal mortality.

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50. Consider the following statements regarding the health of Scheduled Tribes (ST) in India:
1. ST populations have higher rates of malnutrition compared to the general population.
2. Infant mortality rates are generally lower in ST communities due to traditional herbs.
3. Access to clean drinking water is a major challenge in many tribal habitations.

Which of the above statement(s) is/are correct?
(A) 1 and 2 only
(B) 1 and 3 only
(C) 2 and 3 only
(D) 1, 2, and 3

51. Which of the following is NOT considered a social determinant of health?
(A) Level of education
(B) Neighborhood safety and crime rates
(C) Individual's ABO blood group
(D) Quality of housing

52. Read the following statements and select the correct option:
Statement I: Religion can influence health through dietary restrictions and fasting practices.
Statement II: All religious practices universally promote modern medical interventions like blood transfusions.
(A) Both Statement I and Statement II are correct.
(B) Statement I is correct but Statement II is incorrect.
(C) Statement I is incorrect but Statement II is correct.
(D) Both Statement I and Statement II are incorrect.

53. Which of the following is the most appropriate reason why "Social Exclusion" is harmful to health?
(A) It is a standard requirement for most private health insurance plans.
(B) It encourages individuals to practice specialized self-care at their homes.
(C) It restricts access to social and material resources required for health.
(D) It is necessary to maintain the cultural integrity of the majority population.

54. Read the following lists and select the correct answer using the codes given below:
List I: (Disease)
P. Farmers' Lung
Q. Lead Poisoning
R. Asbestosis
S. Silicosis
List II: (Occupational Source)
1. Hay or grain dust
2. Battery manufacturing
3. Insulation work
4. Pottery and ceramics
(A) P-1, Q-2, R-3, S-4
(B) P-2, Q-1, R-4, S-3
(C) P-1, Q-3, R-2, S-4
(D) P-4, Q-2, R-3, S-1

55. Which of the following best illustrates the "Intersectionality" of caste and gender in health?
(A) A high-income male having unrestricted access to a local private gym.
(B) An urban male child receiving timely vaccinations at a public facility.
(C) A wealthy woman choosing an expensive private hospital for her delivery.
(D) A Dalit woman encountering both caste-based stigma and gender-based neglect.

56. Read the following statements and select the correct option:
Assertion (A): Income inequality in a society is a better predictor of population health than average income.
Reason (R): High inequality leads to social friction and underinvestment in public goods like health and education.
(A) Both A and R are true and R is the correct explanation of A.
(B) Both A and R are true but R is not the correct explanation of A.
(C) A is true but R is false.
(D) A is false but R is true.

57. Which of the following is a health hazard specifically associated with child labor in the fireworks industry?
(A) Repetitive strain from digital data entry at a computer desk.
(B) Exposure to high-frequency sonar waves from maritime testing.

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(C) Chemical exposures and the high risk of accidental explosions.
(D) Significant Vitamin D deficiency due to consistent indoor work schedules.

58. Which of the following is a correct statement regarding urban slums?
(A) High population density in slums increases the risk of spreading contagious diseases.
(B) Slums have the best drainage systems in the city.
(C) Slum dwellers have better health indicators than the urban middle class.
(D) Slums are characterized by low population density and high greenery.

59. Which of the following is a direct health consequence of "Son Preference"?
(A) Balanced sex ratio.
(B) Improved health of mothers who give birth to girls.
(C) Increased vaccination rates for girls.
(D) Female feticide and neglect of the girl child's health.

60. Consider the following statements regarding social capital and health:
1. High social capital can lead to better dissemination of health information.
2. Social capital has no role in mental health recovery.
3. Trust within a community can improve the effectiveness of public health campaigns.

Which of the above statement(s) is/are correct?
(A) 1 and 2 only
(B) 1 and 3 only
(C) 2 and 3 only
(D) 1, 2, and 3

61. Which of the following is an INCORRECT pair?
(A) Poverty – Malnutrition
(B) Education – Health Literacy
(C) High Income Inequality – High Social Cohesion
(D) Caste – Social Exclusion

62. The impact of "Domestic Violence" on women's health includes:
(A) Only physical injuries.
(B) Improvement in psychological resilience.
(C) No impact on the health of the children in the household.
(D) Physical, mental, and reproductive health issues.

63. Read the following statements and select the correct option:
Assertion (A): Health literacy is not just about the ability to read but also the ability to act on health information.
Reason (R): A person may read a label but may not have the numeracy skills to calculate a medication dose.
(A) Both A and R are true and R is the correct explanation of A.
(B) Both A and R are true but R is not the correct explanation of A.
(C) A is true but R is false.
(D) A is false but R is true.

64. Which of the following is a characteristic of "Tribal Health" in India?
(A) Lower than average incidence of malaria.
(B) High prevalence of sickle cell disease in specific groups.
(C) Complete coverage by modern tertiary care hospitals.
(D) Very high literacy rates leading to high health awareness.

65. Occupational health hazards for sanitation workers in India often include:
(A) High risk of radiation from medical imaging equipment.
(B) Exposure to toxic gases in sewers without protective gear.
(C) Allergic reactions to expensive chemical perfumes.
(D) Hearing loss from high-decibel acoustic laboratory testing.

66. Read the following lists and select the correct answer using the codes given below:
List I: (Factor)
P. Unemployment
Q. Education
R. Housing
S. Religion
List II: (Impact)
1. Better decision-making for health
2. Psychological stress and depression
3. Protection from environmental hazards

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4. Influences health-seeking behaviors

(A) P-2, Q-1, R-3, S-4
(B) P-1, Q-2, R-3, S-4
(C) P-2, Q-3, R-1, S-4
(D) P-3, Q-1, R-4, S-2

67. Which of the following is a negative health determinant for the girl child in a household with "Son Preference"?
(A) Early enrollment in school.
(B) Excessive consumption of protein-rich food.
(C) Delayed treatment-seeking for illnesses.
(D) Frequent health check-ups.

68. The "Gini Coefficient" is a measure often used in health studies to quantify:
(A) The level of health literacy in a population.
(B) The number of doctors per 1000 people.
(C) The rate of infant mortality.
(D) The extent of income inequality in a society.

69. Read the following statements and select the correct option:
Statement I: Social determinants of health can be influenced by government policies.
Statement II: Factors like housing and sanitation are outside the scope of public health policy.
(A) Both Statement I and Statement II are correct.
(B) Statement I is correct but Statement II is incorrect.
(C) Statement I is incorrect but Statement II is correct.
(D) Both Statement I and Statement II are incorrect.

70. Consider the following regarding the health of Scheduled Castes (SC) in India:
1. They often face residential segregation which impacts health access.
2. Their health indicators are generally at par with the general category.
3. Economic deprivation is a major factor in their poor health outcomes.

Which of the above statement(s) is/are correct?
(A) 1 and 2 only
(B) 1 and 3 only
(C) 2 and 3 only
(D) 1, 2, and 3

71. Read the following statements and select the correct option:
Assertion (A): Food insecurity in early childhood can lead to irreversible cognitive impairment.
Reason (R): The brain requires specific micronutrients and adequate energy for proper development during the first 1000 days.
(A) Both A and R are true and R is the correct explanation of A.
(B) Both A and R are true but R is not the correct explanation of A.
(C) A is true but R is false.
(D) A is false but R is true.

72. Which of the following is an example of an INCORRECT pair of occupational hazards?
(A) Information Technology – Asbestosis
(B) Coal Mining – Black Lung Disease
(C) Glass Industry – Silicosis
(D) Textile Industry – Byssinosis

73. The concept of "Social Capital" in health includes:
(A) The total amount of money a person has in their bank account.
(B) The number of hospitals in a metropolitan city.
(C) The strength of social networks and community trust.
(D) The value of medical equipment in a country.

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74. Arrange the following steps in the development of an occupational disease in the correct order:
1. Clinical manifestation of symptoms
2. Chronic exposure to the hazardous agent
3. Permanent disability or organ damage
4. Initial entry of the agent into the body

(A) 4-2-1-3
(B) 2-4-1-3
(C) 4-1-2-3
(D) 1-2-4-3

75. Which of the following best describes "Health Literacy"?
(A) The specific IQ score required to graduate from a medical university.
(B) The specific number of years a person has attended a medical school.
(C) The ability to communicate in multiple languages within a hospital setting.

(D) The capacity to obtain and understand health data to make informed decisions.

76. Which of the following is a correct statement?
(A) Caste discrimination has been completely eliminated from all health facilities in India.
(B) Women's nutritional neglect is often rooted in patriarchal social norms.
(C) Social determinants of health are mostly related to an individual's biology.
(D) Poverty has no impact on the spread of infectious diseases.

77. Read the following statements and select the correct option:
Assertion (A): People living in urban slums are more prone to diarrheal diseases.
Reason (R): Slums often lack access to safe drinking water and piped sewage systems.
(A) Both A and R are true and R is the correct explanation of A.
(B) Both A and R are true but R is not the correct explanation of A.
(C) A is true but R is false.
(D) A is false but R is true.

78. Which of the following is a health determinant related to "Employment Status"?
(A) The aesthetic design of the company logo where one is employed.
(B) The specific color of the office walls in the workplace.
(C) The geographical distance of the head office from the nearest airport.
(D) The presence of workplace safety protocols and employment security.

79. Consider the following statements about disability:
1. It is a social determinant of health.
2. It can lead to economic exclusion.
3. It always results in a lower IQ.
Which of the above statement(s) is/are correct?
(A) 1 and 2 only
(B) 1 and 3 only
(C) 2 and 3 only
(D) 1, 2, and 3

80. Read the following lists and select the correct answer using the codes given below:
List I: (Group)
P. Dalit Communities
Q. Tribal Populations
R. Women
S. Children
List II: (Primary Determinant)
1. Caste discrimination
2. Geographical isolation
3. Gender-based neglect
4. Dependence on caregivers
(A) P-1, Q-2, R-3, S-4
(B) P-2, Q-1, R-4, S-3
(C) P-1, Q-3, R-2, S-4
(D) P-4, Q-2, R-3, S-1

81. Which of the following is NOT a component of the social determinants of health framework?
(A) Education
(B) Access to digital communication technology
(C) Social Support Networks
(D) Employment and working conditions

82. Read the following statements and select the correct option:
Statement I: Lower income groups often spend a larger proportion of their income on healthcare through out-of-pocket expenditure.
Statement II: This spending often leads to further impoverishment of the family.
(A) Both Statement I and Statement II are correct.
(B) Statement I is correct but Statement II is incorrect.
(C) Statement I is incorrect but Statement II is correct.
(D) Both Statement I and Statement II are incorrect.

83. Which of the following is the most appropriate strategy to improve health in a community with low health literacy?
(A) Using complex medical jargon in all communications.
(B) Increasing the price of all medical consultations.
(C) Providing information in local languages with simple visual aids.
(D) Closing down all local primary health centers.

84. Read the following statements and select the correct option:

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Assertion (A): Child labor in the bidi-rolling industry is harmful to the respiratory health of children.
Reason (R): Continuous exposure to tobacco dust can lead to chronic bronchitis and other lung issues.
(A) Both A and R are true and R is the correct explanation of A.
(B) Both A and R are true but R is not the correct explanation of A.
(C) A is true but R is false.
(D) A is false but R is true.

85. Which factor describes the social exclusion of minority communities in health?
(A) Over-representation in the medical profession.
(B) Priority access to all government health schemes.
(C) Language barriers in accessing health services.
(D) Higher than average nutritional intake.

86. Which of the following is an INCORRECT pair?
(A) Overcrowding – Tuberculosis
(B) Safe Housing – Increased Injury Risk
(C) Poor Sanitation – Cholera
(D) Lack of Ventilation – Indoor Air Pollution

87. Which of the following is a health impact of gender inequality in India?
(A) Higher life expectancy for women in all regions.
(B) Lower maternal mortality rates in patriarchal societies.
(C) Equal distribution of domestic work between genders.
(D) High prevalence of anemia among adolescent girls.

88. Consider the following statements regarding occupational health:
1. Occupational diseases are often under-reported in the informal sector.
2. Ergonomic hazards are only found in heavy industries like steel.
3. Personal Protective Equipment (PPE) can reduce the risk of occupational hazards.
Which of the above statement(s) is/are correct?
(A) 1 and 2 only
(B) 1 and 3 only
(C) 2 and 3 only
(D) 1, 2, and 3

89. Which of the following best describes the "Living Conditions" determinant?
(A) The total number of television sets in a household.
(B) The variety and style of clothes an individual owns.
(C) The quality of the physical environment, such as housing and sanitation.
(D) The statistical frequency of dining out at restaurants.

90. Read the following lists and select the correct answer using the codes given below:
List I: (Social Factor)
P. Poverty
Q. Education
R. Occupation
S. Gender
List II: (Associated Health Issue)
1. Malnutrition
2. Health Literacy
3. Silicosis
4. Maternal Mortality
(A) P-1, Q-2, R-3, S-4
(B) P-2, Q-1, R-4, S-3
(C) P-1, Q-3, R-2, S-4
(D) P-4, Q-2, R-1, S-3

91. Which of the following is a consequence of social exclusion for people with disabilities?
(A) Improved access to public transport.
(B) Greater participation in community health programs.
(C) Enhanced health insurance coverage.
(D) Reduced opportunities for employment and social interaction.

92. Read the following statements and select the correct option:
Statement I: Income inequality leads to a "status anxiety" that can negatively affect mental health.
Statement II: Population health is generally better in countries with a smaller gap between the rich and the poor.
(A) Both Statement I and Statement II are correct.
(B) Statement I is correct but Statement II is

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incorrect.
(C) Statement I is incorrect but Statement II is correct.
(D) Both Statement I and Statement II are incorrect.

93. Which of the following is a negative health behavior sometimes influenced by religious beliefs?
(A) Consistent hand washing protocols before eating daily meals.
(B) Strict prohibition of any tobacco or nicotine-related product use.
(C) Refusal of life-saving interventions like blood transfusions or vaccines.
(D) Strong community support systems for the elderly and the sick.

94. Read the following statements and select the correct option:
Assertion (A): Tribal health indicators in India are often worse than those of the general population.
Reason (R): Tribal areas often lack adequate health infrastructure and have high rates of communicable diseases and malnutrition.
(A) Both A and R are true and R is the correct explanation of A.
(B) Both A and R are true but R is not the correct explanation of A.
(C) A is true but R is false.
(D) A is false but R is true.

95. Consider the following statements:
1. Son preference can lead to female infanticide.
2. Gender bias in health-seeking is non-existent in urban India.
3. Women often neglect their own health to care for the family.
Which of the above statement(s) is/are correct?
(A) 1 and 2 only
(B) 1 and 3 only
(C) 2 and 3 only
(D) 1, 2, and 3

96. Which of the following is the most appropriate definition of "Food Security"?
(A) Having a large enough refrigerator to store food for a month.
(B) Permanent access to sufficient, safe, and nutritious food for an active life.
(C) Having a consistent variety of imported exotic fruits available.
(D) The government having a large stockpile of grain in warehouses.

97. Which of the following is an occupational disease of coal miners?
(A) Byssinosis
(B) Pneumoconiosis (Black Lung)
(C) Bagassosis
(D) Silicosis

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98. Read the following statements and select the correct option:
Statement I: Caste-based discrimination in healthcare can manifest as longer waiting times for certain groups.
Statement II: Such discrimination has no impact on whether a person returns for a follow-up visit.
(A) Both Statement I and Statement II are correct.
(B) Statement I is correct but Statement II is incorrect.
(C) Statement I is incorrect but Statement II is correct.
(D) Both Statement I and Statement II are incorrect.

99. Which of the following is a negative health determinant specifically for people living in urban slums?
(A) Proximity to high-end shopping malls and retail centers.
(B) Availability of excessive open-air parking for residents.
(C) High exposure to vector-borne and water-borne diseases.
(D) Lack of air pollution due to fewer automobiles within the slum.

100. Social determinants of health are shaped by the distribution of:
(A) The geographic distribution of natural resources within a region.
(B) Individual success and hard work across various social strata.
(C) Patented medical technologies and advanced drug formulations.
(D) Money, power, and resources across various levels.

ANSWERS

1. (B) The conditions in which people are born, grow, live, work, and age.
Social determinants of health encompass non-medical factors that influence health outcomes. These factors involve the specific environments where individuals reside and function throughout their entire lives. They are shaped by the distribution of money, power, and resources at global and local levels. Understanding these social conditions is essential for addressing systemic health inequities and improving population well-being.

2. (B) Statement I is correct but Statement II is incorrect.
Higher economic status provides better access to nutritious food, safe housing, and education, leading to improved health outcomes across populations. However, wealth influences health through multiple pathways beyond just insurance coverage, such as reduced environmental exposures and lower stress levels. Therefore, assuming that economic status only impacts health through the ability to purchase medical insurance is a factually incorrect perspective.

3. (C) Economic deprivation causing illness, which in turn reduces earning potential.
The poverty-ill health cycle describes a bidirectional relationship where lack of financial resources leads to poor nutrition and living conditions, causing sickness. Subsequently, illness prevents individuals from working, resulting in lost wages and deeper financial hardship. This self-reinforcing mechanism makes it difficult for marginalized populations to escape poverty without external interventions focusing on both healthcare access and economic stability.

4. (A) P-2, Q-1, R-4, S-3
Income inequality refers to wealth distribution gaps within populations, while health literacy involves understanding medical information. Social capital represents networks and norms of reciprocity in a community. Occupational hazards are health risks present in work environments. Correctly mapping these concepts is essential for identifying different social determinants and their unique impacts on the health status of diverse communities.

5. (C) Directly modifying the individual's genetic code at birth.
Education influences health by improving knowledge of preventive behaviors and increasing access to safer, higher-paying employment opportunities. It also enhances a person's sense of agency and control over their life circumstances. While education significantly shapes lifestyle and socioeconomic status, it has no biological mechanism to alter an individual's inherited genetic code, which remains fixed from the moment of conception.

6. (B) Health literacy
Health literacy involves more than just reading; it requires the ability to interpret and apply health-related information to make informed decisions. An individual who can read a prescription but cannot calculate a weight-based dosage demonstrates a deficit in functional numeracy and information application. This lack of comprehension can lead to medication errors and poor outcomes, regardless of general intelligence.

7. (A) Both A and R are true and R is the correct explanation of A.
Workers in India's unorganized sector face heightened vulnerability to occupational diseases because this sector operates outside strict regulatory oversight. The absence of safety protocols and lack of health insurance leave these individuals exposed to hazardous conditions without protection or financial recourse. Consequently, the lack of institutional safeguards directly explains the increased health risks observed among workers in this sector.

8. (A) Stone crushing and mining
Silicosis is a debilitating lung disease caused by the inhalation of crystalline silica dust over a long period. This hazard is most prevalent in industries involving stone crushing, mining, sandblasting,

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and foundry work. The inhaled particles lead to permanent inflammation and scarring in the lungs, making it a classic occupational disease directly linked to specific industrial processes and environmental exposures.

9. (C) It often results in long-term physical deformities and respiratory issues.
Child labor severely impacts development by exposing young individuals to hazardous conditions during critical growth phases. Children working in unregulated industries often suffer from long-term physical deformities and chronic respiratory issues. Furthermore, the deprivation of education and play limits cognitive development, creating a lasting negative impact on their overall health and future socioeconomic potential within the broader society.

10. (C) 1 and 3 only
Gender roles significantly influence health through household food distribution, where women and girls often receive less nutrition. Additionally, societal masculinity norms often encourage risky behaviors in men, such as substance abuse. However, women in rural areas typically face more barriers to healthcare rather than having higher access. Thus, social norms and gendered expectations create distinct and unique health challenges.

11. (D) Neglect in nutrition and delayed medical treatment.
Son preference in certain societies creates a hierarchy that devalues the health and survival of girls. This social determinant manifests as nutritional neglect, where boys are prioritized for calorie-dense foods. Additionally, parents may delay seeking medical treatment for sick daughters while acting promptly for sons. These biased practices result in higher morbidity and mortality rates among female children over time.

12. (B) Women eating last, often consuming the least nutritious portions.
Nutritional neglect in traditional households is often rooted in patriarchal norms where women eat after male members. This practice frequently results in women consuming remaining portions, which are often lower in protein and essential micronutrients. Such systematic deprivation contributes to high rates of anemia among women, directly impacting their long-term health and overall reproductive outcomes within the domestic setting.

13. (A) 2-3-1-4
The poverty-health trap begins with poor living conditions and malnutrition, which weaken the immune system. This vulnerability leads to the onset of chronic infectious diseases. Sickness subsequently causes a loss of wages due to the inability to work and high treatment costs. Finally, the resulting financial strain causes the individual to descend further into deeper poverty, completing the cycle.

14. (D) It leads to long-term psychological trauma and reproductive health issues.
Domestic violence is a critical social determinant because its effects extend far beyond immediate physical harm. It causes severe long-term psychological trauma and reproductive health complications. The persistent fear and stress associated with abuse also weaken the immune system and increase the risk of mental health disorders. Therefore, violence acts as a systemic barrier to achieving optimal health and well-being.

15. (A) Both A and R are true and R is the correct explanation of A.
Caste-based discrimination creates systemic barriers that result in poorer health outcomes for marginalized communities. Social exclusion often manifests as restricted access to communal water sources and public health infrastructure. These discriminatory practices force individuals into unsanitary environments and prevent them from receiving timely medical care. Thus, social exclusion is the direct mechanism through which caste impacts health status and equity.

16. (B) Scheduled Tribe Status – Higher than average life expectancy
Identifying Scheduled Tribe status as being associated with higher than average life expectancy is incorrect. In reality, tribal populations in India often face significant health disparities, resulting in lower life expectancy compared to the general population. Factors contributing to this include geographic isolation, high rates of malnutrition, and limited access

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to healthcare. The other options correctly link determinants to health outcomes.

17. (B) Perceived or actual discrimination by healthcare providers.
Lower utilization of health services by Scheduled Caste populations is often driven by experiences of discrimination within medical settings. When individuals encounter prejudice or indifferent treatment from healthcare providers, it erodes trust in the formal health system. This social barrier discourages people from seeking timely care, leading to delayed diagnoses and poorer outcomes. Addressing provider bias is essential for health equity.

18. (D) 1, 2, and 3
Tribal health in India is influenced by multiple complex factors including geographic isolation from health facilities and linguistic barriers between patients and providers. Additionally, certain tribal groups have a high prevalence of genetic disorders like Sickle Cell Anemia. These combined social and biological determinants create a unique set of challenges that require culturally sensitive and accessible healthcare interventions to improve health.

19. (A) Both A and R are true and R is the correct explanation of A.
Overcrowding in housing is a major determinant for tuberculosis transmission because it increases the probability of contact with infected individuals. In cramped spaces with poor ventilation, airborne pathogens like bacteria remain suspended in the air for longer periods. This physical proximity allows pathogens to spread easily from person to person. Therefore, inadequate housing conditions directly facilitate the spread of this disease.

20. (A) P-2, Q-1, R-3, S-4
Urban slums are linked to water-borne diseases due to poor sanitation, while child labor causes stunted growth. Son preference often results in reduced immunization rates for girls as resources are prioritized for boys. Social exclusion leads to delayed health-seeking behavior because of the stigma associated with marginalized identities. Matching these determinants to their impacts highlights the social nature of health outcomes.

21. (C) Unclear land tenure resulting in inadequate sanitation facilities.
Urban slums are characterized by unclear land tenure, which prevents the installation of formal infrastructure like piped water and sewage systems. This lack of legal recognition leads to inadequate sanitation and reliance on unsafe water sources, increasing the risk of infectious diseases. Without secure housing rights, dwellers often lack the necessary basic facilities to maintain hygiene and prevent spreading various illnesses.

22. (B) Statement I is correct but Statement II is incorrect.
Social capital consists of the resources and support available through an individual's social networks and community connections. Contrary to the second statement, high levels of social capital are generally associated with lower mortality rates and better mental health in elderly populations. Strong social ties provide emotional support and practical assistance, which are protective factors for health during aging and illness.

23. (A) Both A and R are true and R is the correct explanation of A.
Minority communities often experience poorer health outcomes due to systemic social exclusion. This exclusion limits their access to quality education, stable employment, and health information that is linguistically appropriate. When people are marginalized from mainstream societal resources, they face increased barriers to maintaining health and accessing care. Thus, the structural denial of opportunities directly explains the health disparities observed groups.

24. (A) Encouraging hygiene rituals and prohibition of alcohol/tobacco.
Religious practices can positively influence health by promoting hygiene rituals, such as frequent washing, and prohibiting the use of harmful substances like alcohol and tobacco. These guidelines can lead to a lower incidence of chronic diseases and infections within observant communities. By embedding healthy behaviors into spiritual life, religion acts as a social determinant that can enhance individual health outcomes.

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25. (C) Overlapping social identities like caste and gender creating unique disadvantages.
Intersectionality in health emphasizes that an individual's outcomes are shaped by the combination of multiple social identities. For example, a person may face simultaneous challenges due to their caste, gender, and economic status. These overlapping identities create unique and compounded disadvantages that cannot be understood by looking at one factor alone. This framework helps in designing more targeted public health interventions.

26. (A) 1 and 2 only
People with disabilities encounter significant physical barriers, such as lack of ramps, which impede their access to health facilities. Furthermore, the social stigma associated with disability often leads to isolation and poor mental health outcomes. While these challenges are pervasive, it is incorrect to assume that most healthcare providers are naturally trained in sign language or disability ethics without specialization.

27. (A) 2-3-1
Infants have the highest vulnerability to environmental determinants because their immune systems and organs are still developing. The elderly also face high vulnerability due to age-related physiological decline and potential social isolation. In contrast, healthy adults generally have the most robust defenses and the greatest capacity to adapt to environmental stressors. Therefore, the logical sequence of vulnerability ranges from infants.

28. (B) Pesticide poisoning and heat stroke.
Agricultural workers are frequently exposed to specific occupational hazards such as toxic pesticides and extreme environmental conditions. Chronic exposure to chemicals can lead to acute poisoning or long-term health issues, while working outdoors in intense sun increases the risk of heat stroke. These risks are inherent to the nature of farming work and require specific protective measures to ensure safety.

29. (C) Increased psychological stress and loss of health insurance.
Unemployment negatively impacts health by causing significant psychological stress and financial insecurity. The loss of steady income often results in the loss of employer-sponsored health insurance, making medical care unaffordable. Furthermore, the emotional toll of job loss can lead to depression and unhealthy coping mechanisms. These factors combine to deteriorate both mental and physical health, creating a cycle of vulnerability.

30. (D) Availability, Accessibility, and Affordability.
Food security is a multifaceted determinant of health comprising three essential dimensions. Availability refers to the consistent presence of enough food. Accessibility ensures that food is physically reachable by all individuals. Affordability means that people have the financial resources to purchase nutritious food without compromising other basic needs. All three components must be met simultaneously to ensure a population is healthy.

31. (A) Plumbism – Software engineers
Plumbism, or lead poisoning, is an occupational hazard typically associated with industries like battery manufacturing, printing, and lead smelting, rather than software engineering. Software engineers are more prone to ergonomic issues like carpal tunnel syndrome or eye strain. The other pairs correctly identify dust-related risks in various industries, such as cotton textile work, coal mining, and construction-related asbestos exposure hazards.

32. (B) Inequalities in the conditions in which people live and work.
The concept that social injustice is a major cause of death refers to preventable health disparities arising from unfair social conditions. These inequalities include unequal access to clean water, safe housing, quality education, and fair employment. When society fails to provide these basic requirements equitably, the resulting poor health and early deaths are a consequence of systemic social injustice rather than biology.

33. (B) Erosion of trust and increased social stress.
High income inequality in a society leads to the erosion of social trust and increased levels of chronic stress among the population. This social friction negatively impacts community cohesion and reduces the collective willingness to invest in public goods like healthcare. Consequently,

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even the relatively wealthy in highly unequal societies may experience poorer health outcomes compared to those in egalitarian nations.

34. (A) P-3, Q-1, R-2, S-4
Economic determinants include per capita expenditure, while environmental factors involve living conditions like slum overcrowding. Socio-cultural determinants encompass practices like gender-based food distribution within families. Occupational hazards are represented by specific exposures like lead in factories. Categorizing these factors correctly allows public health professionals to address the diverse social roots of health issues through specific and targeted policy interventions.

35. (C) It is limited only to the ability to read medical pamphlets.
Health literacy is a broad concept that extends far beyond just reading medical pamphlets. It encompasses the ability to navigate complex healthcare systems, understand numerical data like medication dosages, and communicate effectively with providers. Limiting the definition to basic reading skills is incorrect because individuals must also be able to analyze information and make informed health decisions to improve their outcomes.

36. (D) Their autonomy in decision-making within the family.
Reproductive health outcomes for women are strongly linked to their autonomy and power within the household. Women who have the authority to make decisions regarding their own healthcare and family planning are more likely to seek prenatal care and use contraception. In contrast, lack of autonomy often leads to delayed medical attention and poorer maternal health outcomes, highlighting how gender dynamics.

37. (A) Both A and R are true and R is the correct explanation of A.
The elderly in India face increased health vulnerability due to shifting social structures. As traditional joint families give way to nuclear units and young people migrate for work, the customary support systems for seniors are weakened. This transition leaves many elderly individuals without adequate care or financial support for medical needs. Thus, the change in family dynamics directly explains rising health neglect.

38. (B) Systematic denial of rights and social resources to specific marginalized groups.
Social exclusion involves the systematic process by which certain groups are denied access to the rights, opportunities, and resources available to the rest of society. This exclusion can be based on factors like caste, religion, or disability. When people are marginalized, they are often unable to participate fully in social life or access essential services like healthcare, leading to poorer outcomes.

39. (D) A group of lung diseases caused by inhalation of dust.
Pneumoconiosis is a collective term for lung diseases resulting from the long-term inhalation of various types of mineral or organic dust in occupational settings. These conditions include silicosis, asbestosis, and black lung disease. The inhaled particles cause permanent damage to the lung tissue, leading to chronic respiratory impairment. Prevention involves rigorous dust control measures and the use of protective worker equipment.

40. (C) 1 and 3 only
Food security involves consistent physical and economic access to sufficient food for all individuals. Chronic insecurity is a direct cause of childhood stunting and developmental issues. Contrary to the second statement, nutritional quality is a vital component of food security; consuming enough calories is insufficient if the diet lacks essential micronutrients. Therefore, a truly food-secure population requires access to balanced diets.

41. (C) Geographic distance and lack of transportation.
Tribal communities in India frequently reside in remote, hilly, or forested areas, creating a significant geographic barrier to healthcare. The lack of reliable transportation makes it difficult for these populations to reach distant health centers, especially during emergencies. This physical isolation, combined with a shortage of local medical facilities, ensures that tribal groups often remain underserved by the modern healthcare system.

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42. (A) Both Statement I and Statement II are correct.
Child labor deprives individuals of basic education, which is a fundamental long-term determinant of health and socioeconomic stability. Additionally, specific industries like carpet weaving expose children to immediate physical risks, including eye strain and respiratory damage from wool dust. Both statements correctly highlight how early entry into the workforce negatively impacts a child's current well-being and their future potential for health.

43. (D) Increased risk of vector-borne diseases like malaria.
Poor housing conditions, characterized by stagnant water and lack of screens or proper drainage, significantly increase the risk of vector-borne diseases like malaria and dengue. These environments provide breeding grounds for mosquitoes and other disease-carrying insects. Consequently, improving housing infrastructure is a vital public health strategy to reduce the incidence of these infections and protect the health of residents in vulnerable.

44. (A) P-2, Q-1, R-4, S-3
Rural women often face anemia and limited autonomy, while urban slum dwellers struggle with poor sanitation. The elderly frequently deal with degenerative diseases and social isolation. Migrant workers face the unique challenge of non-portable health benefits when moving across regions. Correctly identifying these specific challenges allows for the development of tailored health policies that address the unique social determinants affecting populations.

45. (A) The Poverty-Ill Health Cycle
The poverty-ill health cycle represents a self-perpetuating relationship where lack of wealth leads to poor living conditions and sickness. In turn, illness reduces an individual's ability to work and increases medical expenses, further entrenching them in poverty. This concept highlights how social and health factors are deeply interconnected, requiring comprehensive interventions that address both economic stability and healthcare access effectively.

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46. (D) Occupational Disease – Bagassosis (Sugarcane dust)
Bagassosis is a recognized occupational lung disease caused by the inhalation of dust from moldy sugarcane fibers, known as bagasse. This condition is prevalent among workers in paper and cardboard industries that use sugarcane as raw material. The other pairs are incorrect: high social capital strengthens support, son preference worsens sex ratio, and income inequality creates unequal opportunities for populations.

47. (A) Both A and R are true and R is the correct explanation of A.
Improving female literacy is a powerful tool for reducing infant mortality because educated mothers possess better health knowledge. They are more likely to understand the importance of timely vaccinations, maintain better hygiene, and recognize early signs of illness in their children. These behaviors directly contribute to improved survival rates. Thus, increased capacity for health-related decision-making among women explains reduced infant mortality.

48. (B) Reading a thermometer and deciding if a child has a fever.
A competency-based health literacy task requires an individual to apply health information to solve a practical problem. Reading a thermometer and interpreting the result to determine if a fever is present is a clear example. It involves both the technical skill of using a tool and the cognitive skill of assessment. This application of knowledge is vital for effective individual self-care.

49. (B) Economic dependency and lack of geriatric care.
For the elderly in India, economic dependency on family members is a major social determinant of health. When older adults lack their own income, they may be unable to afford necessary medical treatments. This is compounded by a general lack of specialized geriatric care facilities in many regions. These factors can lead to neglect of chronic conditions and declining quality of life.

50. (B) 1 and 3 only
Scheduled Tribe populations in India experience higher rates of malnutrition and face significant challenges in accessing clean drinking water. Contrary to the second statement, infant mortality

rates are generally higher in these communities due to limited access to modern healthcare and poor living conditions. Addressing these disparities requires focused efforts to improve nutrition, water infrastructure, and maternal-child health services within habitations.

51. (C) Individual's ABO blood group
Social determinants of health refer to external social and environmental factors that influence health outcomes, such as education, neighborhood safety, and housing quality. In contrast, an individual's ABO blood group is a purely biological and genetic trait determined at birth. While it has clinical significance, it is not shaped by social or economic conditions, making it distinct from social determinants.

52. (B) Statement I is correct but Statement II is incorrect.
Religion significantly influences health through practices like dietary restrictions and fasting, which have various physiological effects. However, it is incorrect to say that all religious practices universally promote modern medical interventions. Some religious groups have beliefs that lead to the rejection of specific treatments, such as blood transfusions. Therefore, religion can act as both a positive and negative determinant depending on beliefs.

53. (C) It restricts access to social and material resources required for health.
Social exclusion is harmful because it systematically prevents individuals and groups from accessing essential resources needed for good health. These include quality education, stable employment, safe housing, and adequate healthcare services. By marginalizing people from these societal benefits, social exclusion creates deep-seated health inequities and increases vulnerability to disease. Addressing exclusion is therefore fundamental to improving population health for all individuals.

54. (A) P-1, Q-2, R-3, S-4
Farmers' lung is caused by hay dust, while lead poisoning is linked to battery manufacturing. Asbestosis results from exposure during insulation work, and silicosis is a risk in pottery and ceramics. Correctly matching these diseases to their occupational sources is vital for identifying at-risk workers. These examples illustrate how specific industrial and agricultural processes lead to serious complications if hazards are unmanaged.

55. (D) A Dalit woman encountering both caste-based stigma and gender-based neglect.
The concept of intersectionality is best illustrated when multiple social disadvantages overlap, such as a Dalit woman facing both caste discrimination and gender-based neglect. Her health experience is not just the sum of these factors but a unique, compounded form of marginalization. This perspective helps in understanding why certain groups face significantly worse outcomes and why interventions must address multiple dimensions.

56. (A) Both A and R are true and R is the correct explanation of A.
Income inequality is a powerful predictor of population health because high levels of disparity can lead to social friction and chronic stress. When a large gap exists between the rich and the poor, there is often a lack of political will to invest in public goods like health. This underinvestment and social fragmentation negatively affect entire populations, explaining why more egalitarian societies.

57. (C) Chemical exposures and the high risk of accidental explosions.
Child labor in the fireworks industry is extremely dangerous due to constant exposure to toxic chemicals and the high risk of accidental explosions. These children work in hazardous environments without proper safety equipment, leading to skin ailments, respiratory issues, and severe injuries. This example highlights the urgent need to eliminate child labor in hazardous industries to protect fundamental rights to health.

58. (A) High population density in slums increases the risk of spreading contagious diseases.
High population density is a defining characteristic of urban slums that significantly increases the risk of spreading contagious diseases. In cramped living conditions with poor ventilation, pathogens can easily move between individuals. This is often exacerbated by inadequate sanitation and limited access to clean water, making slums hotspots for infectious

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outbreaks. Improving physical environments is a critical priority for protecting public health.

59. (D) Female feticide and neglect of the girl child's health.
Son preference is a social determinant that has devastating direct consequences, including female feticide and the systematic neglect of the girl child's health. In societies where boys are valued more highly, female infants may receive less food and delayed medical care compared to male siblings. This pervasive gender bias leads to skewed sex ratios and higher mortality rates among girls.

60. (B) 1 and 3 only
Social capital plays a vital role in health by facilitating the dissemination of health information and improving the effectiveness of public health campaigns through community trust. However, saying it has no role in mental health recovery is incorrect; strong social networks provide emotional support and are crucial for mental well-being. Fostering social capital is an important strategy for enhancing population health outcomes.

61. (C) High Income Inequality – High Social Cohesion
The pair linking high income inequality with high social cohesion is incorrect. In reality, large gaps between the rich and poor are typically associated with lower social cohesion, increased social friction, and a lack of trust within communities. Other pairs correctly link poverty with malnutrition, education with health literacy, and caste with social exclusion. Understanding these relationships is crucial for addressing health.

62. (D) Physical, mental, and reproductive health issues.
Domestic violence is a pervasive social determinant that impacts multiple facets of a woman's health. Beyond immediate physical injuries, it leads to chronic mental health disorders like depression and anxiety. It also significantly affects reproductive health, often resulting in unintended pregnancies and poor outcomes. Furthermore, witnessing violence can have lasting negative effects on the health and development of children in households.

63. (A) Both A and R are true and R is the correct explanation of A.
Health literacy involves the ability to both understand and act on health information. A person may be able to read words on a medication label but lack the numeracy skills required to calculate the correct dose. This gap between reading and application can lead to ineffective or dangerous behaviors. Therefore, the need for practical skills explains why literacy is more than reading.

64. (B) High prevalence of sickle cell disease in specific groups.
A notable characteristic of tribal health in India is the high prevalence of sickle cell disease within certain groups. This genetic condition requires specialized management and awareness. Additionally, tribal populations often face other health challenges like geographic isolation and high rates of malaria. These factors, combined with limited healthcare access, contribute to the unique health profile and disparities seen in tribes.

65. (B) Exposure to toxic gases in sewers without protective gear.
Sanitation workers in India face severe occupational hazards, most notably the exposure to toxic gases while cleaning sewers. This risk is greatly increased when workers are forced to enter confined spaces without adequate protective gear. These exposures can lead to acute poisoning and chronic respiratory issues. Addressing the safety and dignity of sanitation work is a critical public health and justice.

66. (A) P-2, Q-1, R-3, S-4
Unemployment is linked to psychological stress, while education improves health-related decision-making. Proper housing provides essential protection from environmental hazards. Religion is a social determinant that can significantly influence an individual's health-seeking behaviors and dietary choices. Correctly identifying these links demonstrates how various social and economic factors interact to shape the overall health status of individuals and diverse communities.

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67. (C) Delayed treatment-seeking for illnesses.
In households where son preference is prevalent, the girl child often faces systematic neglect, including delayed treatment-seeking for illnesses. Parents may prioritize medical needs of sons, seeking prompt care while waiting to see if a daughter's condition improves on its own. This bias can lead to the worsening of preventable diseases. Such gender-based disparities reflect deep-seated social inequities that impact health.

68. (D) The extent of income inequality in a society.
The Gini coefficient is a standard statistical measure used to quantify the extent of income inequality within a population. In health studies, it is often employed to explore the relationship between wealth distribution and various health indicators. High Gini coefficients are frequently associated with poorer population health, as extreme inequality can lead to social fragmentation and reduced investment in public services.

69. (B) Statement I is correct but Statement II is incorrect.
Government policies play a crucial role in shaping the social determinants of health through various interventions. Contrary to the second statement, factors like housing and sanitation are central to public health policy, as they directly impact the spread of disease. Effective health strategies must therefore integrate these environmental and social factors into a comprehensive framework to successfully improve the health of populations.

70. (B) 1 and 3 only
Scheduled Castes in India often experience residential segregation, which can limit access to quality health facilities and clean environments. Additionally, economic deprivation remains a major factor contributing to poorer outcomes. Contrary to the second statement, their health indicators are generally not at par with the general category, reflecting persistent disparities. Addressing these issues requires targeted social and economic policies alongside improved access.

71. (A) Both A and R are true and R is the correct explanation of A.
Food insecurity in early childhood can cause irreversible cognitive impairment because the developing brain has high demands for specific micronutrients. The first 1000 days of life are a critical window where nutrition profoundly impacts brain structure. If a child lacks adequate food, resulting developmental deficits can persist. Therefore, the physiological needs of the brain explain why early nutritional security is essential.

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72. (A) Information Technology – Asbestosis
The pair linking information technology with asbestosis is incorrect, as asbestosis is a lung disease caused by inhaling asbestos fibers, typically found in construction and shipbuilding. IT workers are more likely to face ergonomic hazards. The other pairs are correct: coal mining causes black lung disease, glass industry involves silicosis risks, and textile industry is linked to byssinosis from cotton dust.

73. (C) The strength of social networks and community trust.
Social capital refers to intangible resources embedded within social networks, such as community trust and norms of reciprocity. In the context of health, high social capital can lead to better dissemination of information and emotional support during illness. It is not about personal financial wealth but about the social connections that enable individuals and communities to maintain their overall well-being effectively.

74. (A) 4-2-1-3
The development of an occupational disease typically begins with the initial entry of a hazardous agent into the body. This is followed by a period of chronic exposure to the agent over time. Subsequently, the clinical manifestation of symptoms occurs as the body's defenses are overwhelmed. Finally, the disease may lead to permanent disability or organ damage if the exposure continues.

75. (D) The capacity to obtain and understand health data to make informed decisions.
Health literacy is the degree to which individuals have the capacity to obtain and understand basic health information needed to make informed decisions. This skill is essential for navigating the healthcare system and engaging in preventive behaviors. It goes beyond simple reading ability to include comprehension and application of

information, which are vital for maintaining good health and managing various illness effectively.

76. (B) Women's nutritional neglect is often rooted in patriarchal social norms.
Patriarchal social norms frequently lead to the nutritional neglect of women in many households, where they may eat last or receive less nutritious food than male members. This social determinant has significant impacts on women's health, including high rates of anemia. Other statements are incorrect: caste discrimination still persists, and poverty is deeply linked to the spread of infectious diseases.

77. (A) Both A and R are true and R is the correct explanation of A.
People in urban slums are more vulnerable to diarrheal diseases because these areas frequently lack access to safe drinking water and proper sewage systems. The resulting poor sanitation and contamination of water sources facilitate the transmission of water-borne pathogens. Without basic hygiene infrastructure, residents are unable to maintain clean environments. Therefore, lack of essential services directly explains the increased disease incidence.

78. (D) The presence of workplace safety protocols and employment security.
Employment status acts as a social determinant through factors like workplace safety protocols and job security. A safe work environment prevents injuries and chronic occupational diseases, while employment security reduces the psychological stress associated with financial instability. These conditions are critical for maintaining both physical and mental well-being. In contrast, aesthetic choices like logo design are not significant determinants of health.

79. (A) 1 and 2 only
Disability is a significant social determinant that can lead to economic exclusion by limiting employment opportunities and access to resources. While it impacts social standing, it is incorrect to say that disability always results in a lower IQ, as many disabilities do not affect cognitive function. Recognizing disability as a social determinant helps in designing inclusive policies that address systemic barriers.

80. (A) P-1, Q-2, R-3, S-4
Dalit communities often face caste discrimination, while tribal populations are frequently affected by geographical isolation. Women's health is significantly influenced by gender-based neglect in many patriarchal settings. Children's health outcomes are tied to their dependence on caregivers for nutrition and medical attention. Correctly identifying these primary determinants allows for the development of targeted policies that address the unique challenges of groups.

81. (B) Access to digital communication technology
While digital communication is increasingly important, it is not traditionally considered a core component of the social determinants of health framework, which focuses on education and employment conditions. These primary factors have a more direct and well-documented impact on health outcomes and inequities. As society evolves, the role of digital access is being studied, but it remains distinct from fundamental conditions.

82. (A) Both Statement I and Statement II are correct.
Lower income groups often lack health insurance and must rely on out-of-pocket expenditure for medical care, which consumes a disproportionate amount of limited income. These high costs can lead to catastrophic spending, forcing families to sell assets, ultimately resulting in further impoverishment. Both statements correctly highlight how financial burden of illness can trap vulnerable populations in cycles of poverty and health.

83. (C) Providing information in local languages with simple visual aids.
To improve health in communities with low literacy, it is most effective to provide information in local languages using simple visual aids. This approach bypasses complex jargon and makes essential data accessible to individuals with varying levels of education. By using clear communication, healthcare providers can empower people to make informed decisions. Such strategies are fundamental for reducing systemic health disparities.

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84. (A) Both A and R are true and R is the correct explanation of A.
Child labor in the bidi-rolling industry is highly detrimental to respiratory health because children are constantly exposed to tobacco dust. Inhaling these particles can lead to chronic bronchitis and other serious lung conditions over time. Since children's respiratory systems are still developing, they are particularly vulnerable to these hazards. Thus, direct exposure to harmful dust in workplaces explains this threat.

85. (C) Language barriers in accessing health services.
Social exclusion of minority communities is often manifested through language barriers that prevent individuals from accessing medical services. When health information and care are not provided in a language that patients understand, it leads to miscommunication and lower utilization of services. These barriers effectively marginalize minority groups from the healthcare system, contributing to poorer outcomes and reflecting forms of systemic social exclusion.

86. (B) Safe Housing – Increased Injury Risk
The pair linking safe housing with increased injury risk is incorrect, as safe housing is designed to reduce injuries through features like proper lighting. The other pairs are correct: overcrowding is a major factor in tuberculosis spread, poor sanitation is linked to cholera outbreaks, and lack of ventilation increases risks from indoor air pollution. Understanding these relationships is vital for environmental health.

87. (D) High prevalence of anemia among adolescent girls.
A significant health impact of gender inequality in India is the high prevalence of anemia among adolescent girls. This is often rooted in dietary neglect and the prioritization of male nutrition within households. Chronic iron deficiency during adolescence can have long-term consequences for a woman's health and future pregnancies. This disparity highlights how social norms based on gender lead to widespread challenges.

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88. (B) 1 and 3 only
Occupational diseases are frequently under-reported in the informal sector due to a lack of oversight and worker protection. Using personal protective equipment is a vital strategy for reducing the risk of various occupational hazards. Contrary to the second statement, ergonomic hazards are common in many settings, including offices. Therefore, occupational health policies must address a wide range of environments and workers.

89. (C) The quality of the physical environment, such as housing and sanitation.
The "living conditions" determinant refers to the quality of the immediate physical environment where people reside. This includes adequacy of housing, access to clean water, and the presence of effective sanitation systems. These factors have a direct impact on the spread of infectious diseases and overall physical well-being. Improving these basic conditions is a fundamental public health intervention aimed at reducing health inequities.

90. (A) P-1, Q-2, R-3, S-4
Poverty is closely linked to malnutrition, while education is a key driver of health literacy. Occupational factors are represented by diseases like silicosis, and gender is a major determinant of maternal mortality rates. Matching these factors with associated health issues illustrates the diverse ways that socioeconomic conditions shape health. Addressing these determinants is essential for creating effective and comprehensive public health strategies.

91. (D) Reduced opportunities for employment and social interaction.
Social exclusion for people with disabilities leads to significant disadvantages, including reduced opportunities for employment and limited social interaction. These barriers are often caused by physical inaccessibility and societal stigma. The resulting isolation and financial insecurity can have severe negative impacts on both mental and physical health. Promoting inclusivity and accessibility is therefore essential for ensuring people participate fully in modern society.

92. (A) Both Statement I and Statement II are correct.
High income inequality creates a sense of "status anxiety" and social competition, which can

lead to chronic stress and poorer mental health outcomes. Furthermore, extensive research shows that population health is generally better in countries with more equitable wealth distribution. Both statements correctly highlight how the overall structure of a society significantly influences the health and well-being of all its members.

93. (C) Refusal of life-saving interventions like blood transfusions or vaccines.
While many religious beliefs promote health, some practices can act as negative determinants, such as the refusal of life-saving interventions like blood transfusions or vaccines. These choices can lead to preventable illnesses and deaths, highlighting complex relationships between faith and health. Public health efforts must navigate these beliefs with sensitivity while ensuring individuals have access to accurate information and medical care.

94. (A) Both A and R are true and R is the correct explanation of A.
Tribal health indicators in India are often significantly worse than the national average due to systemic factors. Tribal regions frequently suffer from inadequate healthcare infrastructure and high rates of communicable diseases. These challenges are exacerbated by geographic isolation and limited access to basic services like clean water. Therefore, lack of essential health resources and disease prevalence in these areas directly explain poor indicators.

95. (B) 1 and 3 only
Son preference in certain cultures can lead to severe consequences like female infanticide. Additionally, women often prioritize needs of their family over their own health, leading to neglect of their own well-being. Contrary to the second statement, gender bias in health-seeking remains a significant issue in both rural and urban areas. These factors highlight how social norms act as powerful determinants.

96. (B) Permanent access to sufficient, safe, and nutritious food for an active life.
Food security is accurately defined as having permanent access to sufficient, safe, and nutritious food to maintain a healthy life. This concept includes physical availability, economic affordability, and nutritional quality. Meeting all these criteria is essential for preventing malnutrition and related health problems. Ensuring food security is therefore a vital component of any strategy aimed at improving population health and reducing inequities.

97. (B) Pneumoconiosis (Black Lung)
Black Lung Disease, a form of pneumoconiosis, is a serious occupational illness specifically associated with coal miners who inhale coal dust over long periods. The inhaled particles cause inflammation and scarring in the lungs, leading to chronic respiratory problems. While other dust-related diseases exist in different industries, black lung is the characteristic hazard of coal mining. Prevention requires rigorous dust suppression measures.

98. (B) Statement I is correct but Statement II is incorrect.
Caste-based discrimination in healthcare can manifest in various ways, such as longer waiting times for certain groups. Contrary to the second statement, such negative experiences have a significant impact on health-seeking behavior, often discouraging individuals from returning for necessary follow-up visits. These social barriers undermine the effectiveness of medical care and contribute to persistent disparities within the broader healthcare system.

99. (C) High exposure to vector-borne and water-borne diseases.
For people living in urban slums, a major negative health determinant is high level of exposure to vector-borne and water-borne diseases. These risks are driven by poor sanitation, inadequate drainage, and lack of access to clean water. In such environments, pathogens and disease vectors can thrive. Improving basic infrastructure and environmental hygiene is therefore a critical priority for protecting these vulnerable populations.

100. (D) Money, power, and resources across various levels.
Social determinants of health are shaped by the distribution of money, power, and resources at various levels. These non-medical factors involve the conditions where people live and function throughout their lives. When resources

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are distributed unequally, it results in health inequities that medical care alone cannot resolve. Addressing these structural imbalances is essential for improving overall population health outcomes effectively.

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CHAPTER 05
Health Culture and Social Responsibility

1. Which of the following best defines the relationship between culture and health?
(A) Health is a biological state functioning independently of social norms.
(B) Culture shapes the perception, experience, and response to health.
(C) Cultural factors primarily influence health outcomes in rural populations.
(D) Health culture is strictly limited to medical systems and infrastructure.

2. Which regional dietary pattern in India is traditionally associated with a high consumption of fermented foods like Idli and Dosa?
(A) Southern Indian diet
(B) Northern Indian diet
(C) Western Indian diet
(D) Eastern Indian diet

3. Read the following assertion and reason and select the correct option.
Assertion (A): Cultural food taboos during pregnancy can lead to nutritional deficiencies in the mother.
Reason (R): Many cultures restrict the intake of "hot" or "cold" foods based on traditional belief systems rather than nutritional science.
(A) Both A and R are true and R is the correct explanation of A.
(B) Both A and R are true but R is not the correct explanation of A.
(C) A is true but R is false.
(D) A is false but R is true.

4. Read the following statements and select the correct option.
Statement I: Vegetarianism in India is often rooted in religious and ethical beliefs.
Statement II: A vegetarian diet inherently guarantees the absence of lifestyle diseases like diabetes.
(A) Both Statement I and Statement II are correct.
(B) Both Statement I and Statement II are incorrect.
(C) Statement I is correct but Statement II is incorrect.
(D) Statement I is incorrect but Statement II is correct.

5. Match the items in List I with those in List II and select the correct option.
List I: (Practice)
P. Vrat
Q. Ayurveda
R. Ojha
S. Yoga
List II: (Description)
1. Traditional healing through faith and rituals
2. Religious fasting practice in India
3. Physical and mental discipline for health
4. Ancient Indian system of medicine
(A) P-2, Q-4, R-1, S-3
(B) P-4, Q-2, R-3, S-1
(C) P-1, Q-3, R-2, S-4
(D) P-2, Q-1, R-4, S-3

6. Consider the following statements regarding food taboos during illness:
1. Certain foods are avoided because they are perceived to aggravate the "humoral" imbalance.
2. Taboos are universally standard across all Indian states regardless of local culture.
3. Restrictions often include avoiding citrus fruits during a common cold.
Which of the above statement(s) is/are correct?
(A) 1 and 2 only
(B) 2 and 3 only
(C) 1 and 3 only
(D) 1, 2, and 3

7. Which of the following is an example of cultural variation in hygiene practices?
(A) Universal use of chemical disinfectants in residential homes.

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(B) Neglecting hand hygiene protocols during religious festivals.
(C) Mandatory vaccination schedules for all cultural groups.
(D) Removing footwear before entering the kitchen or living area.

8. What is a primary cultural barrier to hand washing compliance in some traditional settings?
(A) Preference for using mud or ash for traditional cleansing.
(B) General lack of understanding regarding modern germ theory.
(C) Constant availability of sterile water in rural regions.
(D) Prohibitively high cost of purchasing industrial soaps.

9. Read the following assertion and reason and select the correct option.
Assertion (A): Menstrual hygiene management is often compromised by cultural taboos in India.
Reason (R): Menstruating women are frequently restricted from entering kitchens or participating in religious activities.
(A) Both A and R are true and R is the correct explanation of A.
(B) Both A and R are true but R is not the correct explanation of A.
(C) A is true but R is false.
(D) A is false but R is true.

10. Arrange the following events in the typical chronological sequence of the medicalization of childbirth:
1. Birth assisted by traditional birth attendants (Dais) at home.
2. Introduction of institutional delivery in government hospitals.
3. Birth as a highly monitored surgical and technological procedure.
(A) 1 — 2 — 3
(B) 2 — 1 — 3
(C) 3 — 2 — 1
(D) 1 — 3 — 2

11. Match the items in List I with those in List II and select the correct option.
List I: (Medical System)
P. Homeopathy
Q. Ayurveda
R. Folk Medicine
S. Faith Healing
List II: (Key Concept)
1. Law of Similars (Like cures like)
2. Tridosha (Vata, Pitta, Kapha)
3. Oral traditions and herbal remedies
4. Divine intervention or spiritual energy
(A) P-1, Q-2, R-3, S-4
(B) P-2, Q-1, R-4, S-3
(C) P-3, Q-4, R-1, S-2
(D) P-4, Q-3, R-2, S-1

12. Consider the following statements regarding faith healing in India:
1. It includes visits to dargahs, temples, and local healers like Ojhas.
2. It is often the first point of contact for mental health issues in rural areas.
3. It is strictly prohibited by law in all Indian states.
Which of the above statement(s) is/are correct?
(A) 1 and 2 only
(B) 2 and 3 only
(C) 1 and 3 only
(D) 1, 2, and 3

13. The belief that "Karma" influences the cause of a disease is a characteristic of which dimension?
(A) Biological dimension
(B) Economic dimension
(C) Socio-cultural dimension
(D) Environmental dimension

14. Which factor is most likely to cause delayed health-seeking behavior in a community?
(A) Readily available access to local primary health centers.
(B) High levels of health literacy throughout the community.
(C) Immediate proximity to a large multi-specialty hospital.
(D) Belief that illness results from an "evil eye" (Nazar).

15. Read the following assertion and reason and select the correct option.
Assertion (A): Communication between a doctor and a patient can be hindered by cultural distance.

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Reason (R): Use of complex medical jargon by doctors often alienates patients from lower socio-economic backgrounds.
(A) Both A and R are true and R is the correct explanation of A.
(B) Both A and R are true but R is not the correct explanation of A.
(C) A is true but R is false.
(D) A is false but R is true.

16. Read the following statements and select the correct option.
Statement I: Treatment compliance is influenced by the patient's belief in the efficacy of the medicine.
Statement II: Cultural factors do not interfere with the schedule of taking prescribed medications.
(A) Both Statement I and Statement II are correct.
(B) Both Statement I and Statement II are incorrect.
(C) Statement I is correct but Statement II is incorrect.
(D) Statement I is incorrect but Statement II is correct.

17. Match the items in List I with those in List II and select the correct option.
List I: (Concept)
P. Medicalization
Q. Social Isolation
R. Gender Roles
S. Social Responsibility
List II: (Definition)
1. Defining non-medical conditions as medical problems
2. Prescribed behaviors for men and women in caregiving
3. Community obligation toward the elderly or sick
4. Practice of separating the sick from the healthy
(A) P-1, Q-4, R-2, S-3
(B) P-4, Q-1, R-3, S-2
(C) P-2, Q-3, R-1, S-4
(D) P-3, Q-2, R-4, S-1

18. Consider the following statements regarding the family as a care unit:
1. The family is the primary source of emotional support during chronic illness.
2. Decision-making regarding treatment is usually individualistic in Indian families.
3. Family members often act as mediators between the patient and the doctor.
Which of the above statement(s) is/are correct?
(A) 1 and 2 only
(B) 2 and 3 only
(C) 1 and 3 only
(D) 1, 2, and 3

19. Which group typically bears the disproportionate burden of caregiving in Indian families?
(A) Elderly men
(B) Adolescent boys
(C) Women
(D) Hired domestic help

20. What does the "medicalization of childbirth" imply?
(A) Actively promoting home births with minimal medical intervention.
(B) Increasing the direct role of traditional midwives in surgery.
(C) Reducing the cost of maternity care through cultural rituals.
(D) Redefining a natural life process as a hospital-managed event.

21. Read the following assertion and reason and select the correct option.
Assertion (A): Elder care is traditionally viewed as a social and moral responsibility of the children in India.
Reason (R): The joint family system provides a structural framework for supporting the elderly.
(A) Both A and R are true and R is the correct explanation of A.
(B) Both A and R are true but R is not the correct explanation of A.
(C) A is true but R is false.
(D) A is false but R is true.

22. Read the following statements and select the correct option.
Statement I: Community responsibility is vital in managing epidemics like COVID-19.
Statement II: Cultural practices align with epidemic control measures like social distancing.
(A) Both Statement I and Statement II are correct.

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(B) Both Statement I and Statement II are incorrect.
(C) Statement I is correct but Statement II is incorrect.
(D) Statement I is incorrect but Statement II is correct.

23. Match the items in List I with those in List II and select the correct option.
List I: (Disease Belief)
P. Evil Eye
Q. Curse
R. Karma
S. Humoral Imbalance
List II: (Cultural Context)
1. Result of past actions and moral conduct
2. Influence of a malevolent gaze from others
3. Punishment from a deity or supernatural power
4. Disturbance in the body's internal fluids/ energies
(A) P-2, Q-3, R-1, S-4
(B) P-1, Q-2, R-3, S-4
(C) P-3, Q-4, R-2, S-1
(D) P-4, Q-1, R-3, S-2

24. Consider the following statements regarding tobacco use in India:
1. Bidi smoking is often socially accepted in certain rural peer groups.
2. Chewing tobacco is a common cultural practice across various age groups.
3. Tobacco use is strictly a result of biological addiction with no cultural dimension.
Which of the above statement(s) is/are correct?
(A) 1 and 2 only
(B) 2 and 3 only
(C) 1 and 3 only
(D) 1, 2, and 3

25. Which practice is categorized as a cultural tradition promoting preventive health?
(A) Faith healing for fractures.
(B) Avoiding vaccination due to religious beliefs.
(C) Regular practice of Yoga and Meditation.
(D) Excessive fasting during chronic illness.

26. Arrange the following health-seeking steps in the typical order observed in rural cultural contexts:
1. Consultation with a professional medical doctor.
2. Home remedies and consultation with family elders.
3. Visit to a local faith healer or folk practitioner.
(A) 2 — 3 — 1
(B) 1 — 2 — 3
(C) 3 — 2 — 1
(D) 2 — 1 — 3

27. Read the following assertion and reason and select the correct option.
Assertion (A): Urbanization has led to a significant shift in health culture in India.
Reason (R): Sedentary lifestyles and consumption of processed foods are increasing in urban areas.
(A) Both A and R are true and R is the correct explanation of A.
(B) Both A and R are true but R is not the correct explanation of A.
(C) A is true but R is false.
(D) A is false but R is true.

28. Which of the following is an INCORRECT pair regarding regional food habits?
(A) Punjab — Wheat and dairy-based diet
(B) West Bengal — Maize and meat-based diet
(C) Kerala — Rice and coconut-based diet
(D) Rajasthan — Bajra and pulses-based diet

29. Match the items in List I with those in List II and select the correct option.
List I: (Cultural Practice)
P. Menstrual Taboos
Q. Regional Diets
R. Social Isolation
S. Fasting
List II: (Health Dimension)
1. Dietary patterns and nutrition
2. Stigmatization of the sick
3. Metabolic and spiritual dimension
4. Hygiene and reproductive health
(A) P-4, Q-1, R-2, S-3
(B) P-1, Q-4, R-3, S-2
(C) P-2, Q-3, R-4, S-1
(D) P-3, Q-2, R-1, S-4

30. Consider the following statements regarding alcohol use:

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1. Alcohol consumption patterns vary significantly across different cultural groups.
2. Some cultures use alcohol as a ritual offering.
3. Alcoholism is always treated as a social responsibility rather than a medical issue.

Which of the above statement(s) is/are correct?
(A) 1 and 2 only
(B) 2 and 3 only
(C) 1 and 3 only
(D) 1, 2, and 3

31. What is the main characteristic of "Folk Medicine"?
(A) Knowledge passed through oral traditions and practice.
(B) Practices based on standardized and regulated clinical trials.
(C) Treatments exclusively provided by certified medical doctors.
(D) Protocols relying solely on the use of synthetic chemical drugs.

32. In the context of "Death and Dying," cultural practices primarily serve to:
(A) Increase the overall cost of specialized medical treatment.
(B) Provide a framework for grieving and achieving social closure.
(C) Attempt to ensure the physical revival of the deceased person.
(D) Eliminate the need for maintaining hospital records.

33. Which of the following is an example of "Social Isolation" as a cultural practice during illness?
(A) Quarantining an infectious patient in a medical facility.
(B) Ostracizing individuals with leprosy due to social stigma.
(C) Providing a high-cost private room for a wealthy patient.
(D) Organizing a community prayer for a child during illness.

34. Read the following statements and select the correct option.
Statement I: Homeopathy is widely accepted in India as a gentle and side-effect-free system of medicine.
Statement II: Homeopathy originated in ancient India as part of the Vedic literature.
(A) Both Statement I and Statement II are correct.
(B) Both Statement I and Statement II are incorrect.
(C) Statement I is correct but Statement II is incorrect.
(D) Statement I is incorrect but Statement II is correct.

35. Which of the following is a "negative" health implication of extreme fasting?
(A) Developing mental discipline and personal self-control.
(B) Facilitating the natural detoxification of the human body.
(C) Risks of electrolyte imbalance and significant weakness.
(D) Achieving religious fulfillment and community social bonding.

36. In Indian families, who is traditionally responsible for the daily care of the elderly?
(A) Professional government-appointed social workers.
(B) Local non-governmental community organizations.
(C) Representatives from private medical insurance companies.
(D) Family members, specifically daughters or daughters-in-law.

37. Which concept refers to the cultural belief that looking at a healthy child with envy can make them sick?
(A) Karma
(B) Curse
(C) Evil Eye
(D) Miasma

38. Read the following statements and select the correct option.
Statement I: Ayurveda focuses on maintaining balance between body, mind, and spirit.
Statement II: Ayurveda rejects the use of all herbal products in favor of minerals.
(A) Both Statement I and Statement II are correct.
(B) Both Statement I and Statement II are incorrect.

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(C) Statement I is correct but Statement II is incorrect.
(D) Statement I is incorrect but Statement II is correct.

39. Which of the following is a common "food taboo" during illness in many Indian households?
(A) Increasing intake of protein-rich dal products.
(B) Drinking high volumes of purified drinking water.
(C) Consuming various types of green leafy vegetables.
(D) Avoiding "cold" foods like curd during a fever.

40. What is the role of an "Ojha" in the context of traditional healing?
(A) A faith healer using rituals to remove evil spirits.
(B) A trained surgeon performing minor outpatient operations.
(C) A professional pharmacist selling various Ayurvedic herbs.
(D) A community health volunteer trained by the government.

41. Which of the following best describes the "Medicalization of normal life events"?
(A) Providing essential vitamins to growing children.
(B) Improving basic sanitation in crowded urban areas.
(C) Treating natural aging as a medical pathology.
(D) Building modern secondary schools in rural zones.

42. How does "Urbanization" impact traditional dietary patterns?
(A) Rising consumption of fast foods and processed sugar.
(B) Encouraging the use of local and seasonal fresh produce.
(C) Eliminating the need for national nutritional health programs.
(D) Strictly enforcing vegetarianism across all major Indian cities.

43. Which of the following is a cultural dimension of tobacco use in rural India?
(A) Rejection of tobacco by the youth.
(B) Tobacco usage restricted to modern hospital settings.
(C) Lack of any social acceptance for chewing betel nut products.
(D) Use of Hookah as a symbol of status and communal bonding.

44. Read the following statements and select the correct option.
Statement I: Yoga and Meditation are cultural practices that contribute to mental and physical well-being.
Statement II: These practices have been globally recognized for their health benefits.
(A) Both Statement I and Statement II are correct.
(B) Both Statement I and Statement II are incorrect.
(C) Statement I is correct but Statement II is incorrect.
(D) Statement I is incorrect but Statement II is correct.

45. Which cultural factor often contributes to "treatment non-compliance"?
(A) Ease of access to medicines at a relatively low cost.
(B) High levels of trust in the modern medical system.
(C) Stopping medication once symptoms disappear based on logic.
(D) Attending regular and scheduled follow-up visits with doctors.

46. What is the primary focus of "Social Responsibility" in epidemic management?
(A) Seeking individual profit from selling high-demand masks.
(B) Relying entirely on government actions without community help.
(C) Spreading unverified rumors regarding the epidemic's cause.
(D) Collective action and adherence to public health guidelines.

47. Which of the following is NOT a traditional cause of disease according to Indian folk beliefs?
(A) Genetic mutation in DNA sequences.
(B) Wrath of a goddess.
(C) Evil eye (Nazar).

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(D) Past sins (Karma).

48. Read the following statements and select the correct option.
Statement I: Food habits in India are largely determined by regional geography and climate.
Statement II: In coastal India, rice and fish are cultural staples due to easy availability.
(A) Both Statement I and Statement II are correct.
(B) Both Statement I and Statement II are incorrect.
(C) Statement I is correct but Statement II is incorrect.
(D) Statement I is incorrect but Statement II is correct.

49. Which of the following is a common barrier to "menstrual hygiene" in schools?
(A) Presence of fully sanitized and private toilet facilities.
(B) Cultural shame and a lack of disposal infrastructure.
(C) Excess of reproductive health information provided by teachers.
(D) High availability of free and accessible sanitary napkins.

50. The concept of the "Family as the primary care unit" implies:
(A) Family members provide most long-term care and support.
(B) The hospital is the only venue where patient care occurs.
(C) The state takes absolute responsibility for all citizens' health.
(D) Patients are specifically encouraged to live alone during recovery.

51. Which practice reflects the "cultural compliance" of hand washing?
(A) Using specialized surgical scrub for every common household task.
(B) Deliberately ignoring hand hygiene after visiting a public toilet.
(C) Washing hands with water before meals as a ritual requirement.
(D) Utilizing disposable gloves instead of performing hand washing.

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52. Read the following assertion and reason and select the correct option.
Assertion (A): The "Dargah" and "Temple" are often visited by people seeking cures for chronic illnesses.
Reason (R): Faith healing provides psychological relief and hope where modern medicine may be perceived as failing.
(A) Both A and R are true and R is the correct explanation of A.
(B) Both A and R are true but R is not the correct explanation of A.
(C) A is true but R is false.
(D) A is false but R is true.

53. Which of the following is a health implication of strict vegetarianism if the diet is not balanced?
(A) Excessive protein intake.
(B) High risk of heavy metal poisoning.
(C) Vitamin B12 deficiency.
(D) Immunity to all viruses.

54. Read the following statements and select the correct option.
Statement I: Cultural food taboos during illness are scientifically validated.
Statement II: Some taboos might prevent the patient from consuming necessary nutrients.
(A) Both Statement I and Statement II are correct.
(B) Both Statement I and Statement II are incorrect.
(C) Statement I is correct but Statement II is incorrect.
(D) Statement I is incorrect but Statement II is correct.

55. Match the items in List I with those in List II and select the correct option.
List I: (Term)
P. Fasting
Q. Taboo
R. Compliance
S. Barrier
List II: (Context)
1. Prohibited behavior or food
2. Voluntary abstinence from food
3. Obstacle in communication or access
4. Adherence to medical advice
(A) P-2, Q-1, R-4, S-3
(B) P-1, Q-2, R-3, S-4

(C) P-4, Q-3, R-2, S-1
(D) P-3, Q-4, R-1, S-2

56. Consider the following regarding regional diets:
1. Maize and Sarson-da-saag are popular in Punjab.
2. Fermented rice (Pakhala) is a cultural food in Odisha.
3. Coconut is rarely used in South Indian cooking.

Which of the above statement(s) is/are correct?
(A) 1 and 2 only
(B) 2 and 3 only
(C) 1 and 3 only
(D) 1, 2, and 3

57. Which of the following is a "competency-based" aspect of a healthcare worker in a diverse culture?
(A) Ability to speak professional English with high fluency.
(B) Prescribing only the most expensive medicines available.
(C) Understanding local beliefs to improve trust and compliance.
(D) Deliberately ignoring the family's input during consultations.

58. What is the typical "cultural dimension" of fasting (Vrat) in India?
(A) Linkage to religious devotion and purification of the soul.
(B) Practice performed purely for physical weight loss goals.
(C) Adoption of a government-mandated preventive health practice.
(D) Ritual only practiced by members of the medical community.

59. Read the following assertion and reason and select the correct option.
Assertion (A): In many Indian cultures, the birth of a child is celebrated with specific rituals and food distributions.
Reason (R): Cultural practices around childbirth are designed to provide social support to the new mother.
(A) Both A and R are true and R is the correct explanation of A.
(B) Both A and R are true but R is not the correct explanation of A.
(C) A is true but R is false.
(D) A is false but R is true.

60. Which of the following is an INCORRECT statement?
(A) Homeopathy is categorized as one of the AYUSH systems.
(B) Faith healing is based on modern germ theory.
(C) Ayurveda utilizes the foundational concept of 'Pancha Mahabhuta'.
(D) Prolonged tobacco use is known to cause various oral cancers.

61. Match the items in List I with those in List II and select the correct option.
List I: (Dietary Practice)
P. Dhokla
Q. Litti Chokha
R. Fish Curry and Rice
S. Makki ki Roti
List II: (Region)
1. Bihar
2. Gujarat
3. Punjab
4. West Bengal
(A) P-2, Q-1, R-4, S-3
(B) P-1, Q-2, R-3, S-4
(C) P-4, Q-3, R-2, S-1
(D) P-3, Q-4, R-1, S-2

62. Consider the following statements regarding gender roles in caregiving:
1. Caregiving is often seen as a "natural" extension of women's domestic roles.
2. Men are usually the ones expected to take leave from work to provide bedside care at home.
3. This gendered burden can lead to higher stress levels among women.

Which of the above statement(s) is/are correct?
(A) 1 and 3 only
(B) 2 and 3 only
(C) 1 and 2 only
(D) 1, 2, and 3

63. Which practice is an example of "Folk Medicine"?
(A) Using turmeric paste for healing wounds.
(B) Open heart surgery.
(C) Magnetic Resonance Imaging (MRI).

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(D) Chemotherapy.

64. "Social isolation of the sick" in history was most commonly seen with which disease?
(A) Common cold
(B) Leprosy
(C) Diabetes
(D) Hypertension

65. Read the following assertion and reason and select the correct option.
Assertion (A): Doctors should be aware of the "Hot and Cold" food classification used by patients.
Reason (R): This awareness helps in negotiating a diet plan that the patient is likely to follow.
(A) Both A and R are true and R is the correct explanation of A.
(B) Both A and R are true but R is not the correct explanation of A.
(C) A is true but R is false.
(D) A is false but R is true.

66. Read the following statements and select the correct option.
Statement I: Urbanization often leads to the erosion of traditional community support systems for health.
Statement II: Nuclear families in urban areas find it easier to provide 24/7 care for elderly parents.
(A) Both Statement I and Statement II are correct.
(B) Both Statement I and Statement II are incorrect.
(C) Statement I is correct but Statement II is incorrect.
(D) Statement I is incorrect but Statement II is correct.

67. Which of the following is a "Negative" aspect of the medicalization of childbirth?
(A) Reduced maternal mortality.
(B) Access to emergency neonatal care.
(C) High rates of unnecessary Cesarean sections.
(D) Better monitoring of fetal heart rate.

68. What is the primary reason for "Food Taboos" during pregnancy in some cultures?
(A) Desire to save financial resources on family food purchases.
(B) Strategy to ensure the mother gains maximum healthy weight.
(C) Goal of promoting the intake of modern processed snacks.
(D) Fear that specific foods like papaya might cause miscarriage.

69. Match the items in List I with those in List II and select the correct option.
List I: (Practice)
P. Hand Washing
Q. Meditation
R. Vaccination
S. Fasting
List II: (Goal)
1. Mental health and stress reduction
2. Prevention of infection
3. Acquired immunity
4. Religious merit and self-discipline
(A) P-2, Q-1, R-3, S-4
(B) P-1, Q-2, R-4, S-3
(C) P-4, Q-3, R-2, S-1
(D) P-3, Q-4, R-1, S-2

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70. Consider the following statements about Homeopathy:
1. It is based on the principle of 'extreme dilution'.
2. It is highly popular in India for treating chronic skin conditions.
3. It was developed in India by ancient sages.
Which of the above statement(s) is/are correct?
(A) 1 and 2 only
(B) 2 and 3 only
(C) 1 and 3 only
(D) 1, 2, and 3

71. Which of the following is the best answer for why culture is important in health?
(A) Culture directly determines the genetic makeup of an individual.
(B) People within specific cultural groups rarely become ill.
(C) Traditional culture eventually replaces the need for doctors.
(D) Interventions must be culturally acceptable to be effective.

72. "Delayed health-seeking" can lead to:
(A) Progression of the disease to a more severe

stage.
(B) Significant acceleration of the natural recovery process.
(C) Drastic reduction of medical expenses in the long term.
(D) Improved patient understanding of the underlying illness.

73. Read the following assertion and reason and select the correct option.
Assertion (A): Tobacco use in the form of 'gutkha' is a major public health challenge in India.
Reason (R): It is culturally integrated into social interactions and is easily accessible.
(A) Both A and R are true and R is the correct explanation of A.
(B) Both A and R are true but R is not the correct explanation of A.
(C) A is true but R is false.
(D) A is false but R is true.

74. Read the following statements and select the correct option.
Statement I: The 'Evil Eye' is a belief that envy can cause physical harm.
Statement II: Protective amulets (Taveez) are often used in Indian culture to ward off the evil eye.
(A) Both Statement I and Statement II are correct.
(B) Both Statement I and Statement II are incorrect.
(C) Statement I is correct but Statement II is incorrect.
(D) Statement I is incorrect but Statement II is correct.

75. Which of the following is an example of an INCORRECT pair?
(A) Yoga — Physical Postures
(B) Meditation — Mental Focus
(C) Homeopathy — Diluted Substances
(D) Ayurveda — Chinese Medicine

76. Consider the following statements regarding Menstrual Hygiene:
1. Many girls drop out of school due to a lack of menstrual facilities.
2. In some cultures, menstruating women are considered "impure."
3. Sanitary pads are a primary culturally accepted method of management in rural India.

Which of the above statement(s) is/are correct?
(A) 1 and 2 only
(B) 2 and 3 only
(C) 1 and 3 only
(D) 1, 2, and 3

77. What is the role of the "Family" in the Indian health context?
(A) They are secondary to the private medical insurance provider.
(B) They are prohibited from staying with patients in hospitals.
(C) They serve as the primary decision-makers and caregivers.
(D) They provide financial support without any physical care.

78. Which of the following is a result of "Urbanization" on health?
(A) Noticeable decrease in general urban air pollution levels.
(B) Significant increase in physical labor required in daily life.
(C) Rapid strengthening of community bonds in high-rise buildings.
(D) Increased rates of obesity and hypertensive conditions.

79. Read the following assertion and reason and select the correct option.
Assertion (A): Folk medicine is often the only accessible health resource in remote tribal areas.
Reason (R): Modern medical facilities are often physically distant or culturally alienating to these groups.
(A) Both A and R are true and R is the correct explanation of A.
(B) Both A and R are true but R is not the correct explanation of A.
(C) A is true but R is false.
(D) A is false but R is true.

80. Read the following statements and select the correct option.
Statement I: Alcohol use is prohibited by every religion in India.
Statement II: Some tribal cultures in India use locally brewed alcohol during social and

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religious ceremonies.
(A) Both Statement I and Statement II are correct.
(B) Both Statement I and Statement II are incorrect.
(C) Statement I is correct but Statement II is incorrect.
(D) Statement I is incorrect but Statement II is correct.

81. Which factor is NOT typically associated with "Social Responsibility" in health?
(A) Volunteering to donate blood for local community hospitals.
(B) Hoarding essential medications during a severe supply shortage.
(C) Adhering closely to quarantine rules during an epidemic.
(D) Providing help and care for an elderly or disabled neighbor.

82. In "Doctor-Patient communication," what is a common barrier?
(A) Differing cultural views on the underlying cause of disease.
(B) Communicating with patients using their local primary dialect.
(C) Explaining the required treatment plan in very simple terms.
(D) Practice of active and empathetic listening by the doctor.

83. Read the following assertion and reason and select the correct option.
Assertion (A): Vegetarianism is often associated with the concept of 'Ahimsa' (non-violence) in India.
Reason (R): A vegetarian diet is prescribed by law for citizens under the Indian Constitution.
(A) Both A and R are true and R is the correct explanation of A.
(B) Both A and R are true but R is not the correct explanation of A.
(C) A is true but R is false.
(D) A is false but R is true.

84. Consider the following statements regarding death and dying:
1. Cultural rituals help the family cope with the loss.
2. Cremation and burial are cultural choices based on religious beliefs.
3. Modern hospitals have largely replaced the need for cultural rituals at death.
Which of the above statement(s) is/are correct?
(A) 1 and 2 only
(B) 2 and 3 only
(C) 1 and 3 only
(D) 1, 2, and 3

85. If a patient refuses a life-saving blood transfusion due to religious beliefs, the doctor should:
(A) Compel the patient to accept the transfusion by force.
(B) Discharge the patient immediately and cease all further care.
(C) Respect autonomy and seek culturally acceptable alternatives.
(D) Publicly mock the patient's personal religious belief system.

86. Read the following statements and select the correct option.
Statement I: Ayurveda treats the individual based on their unique 'Prakriti' (constitution).
Statement II: Ayurveda is only concerned with treating the symptoms, not the root cause.
(A) Both Statement I and Statement II are correct.
(B) Both Statement I and Statement II are incorrect.
(C) Statement I is correct but Statement II is incorrect.
(D) Statement I is incorrect but Statement II is correct.

87. Which of the following is an example of a regional dietary pattern?
(A) All citizens in India consuming the same standard breakfast.
(B) Wide use of expensive olive oil in traditional rural villages.
(C) Universal preference for Italian pasta in rural Indian areas.
(D) Using mustard oil for traditional cooking in Eastern India.

88. What is the health dimension of "Hand Washing" before meals?
(A) It reduces the transmission of fecal-oral diseases.
(B) It is a symbolic ritual providing no tangible

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health benefits.
(C) It is a protocol only required within large urban hospitals.
(D) It is a modern invention absent in ancient Indian cultures.

89. Read the following assertion and reason and select the correct option.
Assertion (A): Women in India often ignore their own health to care for other family members.
Reason (R): Socialization processes emphasize the "self-sacrificing" role of women in the family.
(A) Both A and R are true and R is the correct explanation of A.
(B) Both A and R are true but R is not the correct explanation of A.
(C) A is true but R is false.
(D) A is false but R is true.

90. Consider the following statements regarding food habits:
1. Urbanization has increased the diversity of food options.
2. Traditional food habits are inherently unhealthy.
3. Cultural food choices are static and do not change over time.

Which of the above statement(s) is/are correct?
(A) 1 only
(B) 2 only
(C) 1 and 3 only
(D) 1, 2, and 3

91. "Faith healing" at a Dargah or Temple is most often sought for which type of conditions?
(A) Immediate medical attention for acute surgical emergencies.
(B) Receiving routine scheduled childhood vaccinations.
(C) Treating complex fractures resulting from road accidents.
(D) Chronic illnesses and unexplained mental health issues.

92. Which of the following is an EXCEPTION to cultural practices promoting health?
(A) Regular practice of Yoga.
(B) Fasting to the point of severe dehydration.
(C) Consistent daily meditation.
(D) Maintaining balanced regional diets.

93. Read the following statements and select the correct option.
Statement I: The joint family system is a significant source of social security for the elderly.
Statement II: The rise of nuclear families has no impact on elder care.
(A) Both Statement I and Statement II are correct.
(B) Both Statement I and Statement II are incorrect.
(C) Statement I is correct but Statement II is incorrect.
(D) Statement I is incorrect but Statement II is correct.

94. What is 'Medicalization'?
(A) Systematic process of building additional medical colleges.
(B) Equitable distribution of free medicines to the poor.
(C) Historical study of medical practices and their progress.
(D) Defining non-medical problems as medical conditions.

95. Read the following assertion and reason and select the correct option.
Assertion (A): Community participation is essential for the success of health programs like pulse polio.
Reason (R): Cultural leaders can influence community members to accept or reject health interventions.
(A) Both A and R are true and R is the correct explanation of A.
(B) Both A and R are true but R is not the correct explanation of A.
(C) A is true but R is false.
(D) A is false but R is true.

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96. Which of the following is a cultural practice related to hygiene?
(A) Only utilizing a toothbrush once per calendar month.
(B) The traditional ritual of bathing in sacred rivers.
(C) Deliberately avoiding all forms of water during illness.
(D) Wearing the same set of clothing for multiple weeks.

97. Read the following statements and select the correct option.
Statement I: Tobacco use is often initiated in peer groups due to social pressure.
Statement II: Smoking is equally common among men and women in all parts of India.
(A) Both Statement I and Statement II are correct.
(B) Both Statement I and Statement II are incorrect.
(C) Statement I is correct but Statement II is incorrect.
(D) Statement I is incorrect but Statement II is correct.

98. Which of the following is an INCORRECT pair?
(A) Ayurveda — Homeopathy
(B) Ojha — Faith Healing
(C) Yoga — Wellness
(D) Karma — Cause of Disease

99. What is a most appropriate description of the Indian health culture?
(A) It is a monolithic system with no local variation.
(B) It is based on Western Allopathic medical systems.
(C) Pluralistic system where multiple traditions coexist.
(D) It is a cultural system that rejects modern science.

100. Which concept explains why people might visit a temple for a skin disease before going to a dermatologist?
(A) High levels of national economic prosperity.
(B) Achievement of universal health coverage.
(C) High levels of trust in synthetic chemical drugs.
(D) Belief in supernatural causes of disease.

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ANSWERS

1. (B) Culture shapes the perception, experience, and response to health.
Culture serves as a fundamental lens through which individuals interpret their physical well-being. It dictates how symptoms are recognized and which treatments are deemed appropriate within a specific society. By influencing the social construction of illness, cultural norms determine the emotional and practical responses to health challenges, highlighting the interconnectedness between social identity and medicine.

2. (A) Southern Indian diet
Traditional diets in the southern parts of India heavily feature fermentation techniques to enhance the nutritional value and digestibility of staples. Dishes like idli and dosa are created by fermenting rice and lentil batters, providing essential probiotics. This regional culinary preference is deeply rooted in local agricultural patterns and environmental conditions that favor these specific preparation methods.

3. (A) Both A and R are true and R is the correct explanation of A.
Traditional belief systems often categorize foods into binary thermal qualities, such as heating or cooling, regardless of their actual nutrient content. These cultural restrictions can prevent pregnant women from consuming essential vitamins and minerals during a critical developmental period. Consequently, adherence to such taboos directly contributes to nutritional deficiencies, illustrating how deeply held social traditions can impact maternal physiological health.

4. (C) Statement I is correct but Statement II is incorrect.
Dietary choices in India are frequently guided by moral principles such as non-violence and specific religious mandates. While these vegetarian habits can offer significant health benefits, they do not provide an absolute safeguard against modern lifestyle conditions. Factors like high sugar intake, sedentary behavior, and genetic predisposition continue to influence the risk of developing chronic diseases like type two diabetes.

5. (A) P-2, Q-4, R-1, S-3
Indian health culture integrates diverse practices ranging from spiritual disciplines to ancient medical sciences. Vrat represents the ritual of fasting, while Ayurveda provides a structured system for holistic healing. Furthermore, the Ojha operates within the realm of faith-based recovery, and Yoga focuses on achieving physical and mental harmony through specific postures. These elements collectively form a multifaceted approach to wellness.

6. (C) 1 and 3 only
Beliefs regarding illness often involve the concept of humoral balance, where specific foods are thought to either restore or disrupt internal harmony. Many households avoid citrus fruits during respiratory infections due to the perception that they increase phlegm or “coldness” in the body. These practices vary significantly across regions and are not standardized, reflecting the diversity of local traditions.

7. (D) Removing footwear before entering the kitchen or living area.
Hygiene rituals are often deeply embedded in cultural norms rather than just modern sanitation science. The practice of removing footwear before entering specific household areas like the kitchen or living room serves as a symbolic and physical barrier against external pollutants. This traditional habit reflects a cultural distinction between the purity of the home and the perceived impurity of the outside world.

8. (A) Preference for using mud or ash for traditional cleansing.
In various traditional communities, the use of natural materials like mud or ash is considered a culturally valid method for ritual and physical cleansing. This reliance on traditional substances can hinder the adoption of modern soap-based hand hygiene protocols. Such practices are often rooted in historical availability and local

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beliefs about purity, presenting a challenge for contemporary public health interventions.

9. (A) Both A and R are true and R is the correct explanation of A.
Cultural perceptions of menstruation as a state of impurity often lead to the imposition of restrictive social norms on women. These taboos frequently exclude individuals from participating in communal activities or entering sacred spaces like kitchens and temples. Such systemic isolation and stigma directly impede effective menstrual hygiene management by limiting access to facilities and fostering a culture of silence and shame.

10. (A) 1 — 2 — 3
The transition of childbirth practices follows a clear historical progression from domestic to institutional settings. Initially, births occurred primarily at home under the guidance of traditional attendants. This was followed by a shift toward government-led institutional deliveries to improve safety. Finally, contemporary maternity care has evolved into a highly technological and surgical process within specialized hospitals, characterizing the medicalization of birth.

11. (A) P-1, Q-2, R-3, S-4
Diverse medical systems utilize distinct conceptual frameworks for understanding and treating diseases. Homeopathy relies on the principle of using minute doses of substances that mimic symptoms, while Ayurveda focuses on balancing the three fundamental biological energies. Folk medicine is typically preserved through oral heritage and local plants, whereas faith healing attributes recovery to spiritual forces or the intervention of divine powers.

12. (A) 1 and 2 only
Traditional healing practices involving visits to religious sites and local practitioners remain deeply ingrained in rural societies. For many individuals experiencing mental health issues, these spiritual interventions serve as an accessible and culturally familiar first point of contact. While modern medicine is available, the persistence of these faith-based methods highlights the cultural importance of spiritual well-being in the broader health landscape.

13. (C) Socio-cultural dimension
Attributing the cause of an illness to past actions or moral conduct reflects the socio-cultural dimension of health. This belief system suggests that physical suffering is a manifestation of spiritual debt or ethical transgressions from previous lives. Such interpretations influence how individuals experience their conditions and determine the types of remedies they seek, often prioritizing spiritual atonement alongside medical treatment.

14. (D) Belief that illness results from an "evil eye" (Nazar).
When individuals believe that an illness is caused by supernatural forces like the evil eye, they are more likely to seek ritualistic cures before consulting medical professionals. This perception creates a significant barrier to timely diagnosis and treatment within the modern healthcare system. Such culturally rooted explanations for disease can lead to critical delays, often resulting in the worsening of symptoms.

15. (B) Both A and R are true but R is not the correct explanation of A.
Effective communication in clinical settings is often obstructed by the social and educational gap between practitioners and their patients. While the use of complex technical terminology can certainly confuse or alienate individuals, the broader issue of cultural distance involves differing worldviews regarding illness. Both factors independently contribute to misunderstandings, making it difficult for patients to fully engage with their prescribed medical treatments.

16. (C) Statement I is correct but Statement II is incorrect.
A patient's willingness to follow a prescribed medical regimen is strongly influenced by their personal conviction regarding the treatment's effectiveness. However, cultural factors frequently interfere with medication schedules, such as when religious fasting or social rituals conflict with the timing of doses. Understanding these influences is crucial, as social and cultural priorities often override strict adherence to professional medical advice.

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17. (A) P-1, Q-4, R-2, S-3
Sociological concepts in health describe how communities organize care and define illness. Medicalization involves expanding medical authority over natural life processes, while social isolation refers to the physical distancing of the sick. Gender roles often dictate who provides care within the domestic sphere, and social responsibility highlights the collective duty of a community to support its vulnerable or elderly members.

18. (C) 1 and 3 only
In the Indian context, the family serves as the primary support system, offering vital emotional and physical care during long-term illnesses. Relatives often bridge the communication gap between patients and healthcare providers, ensuring that medical instructions are understood and followed. Decisions regarding treatment are typically collective rather than individualistic, reflecting a social structure where the family unit prioritizes group well-being.

19. (C) Women
Social expectations in many cultures place the primary responsibility for domestic labor and caregiving on female family members. This traditional division of labor means that women frequently manage the daily needs of the sick and elderly while also handling household chores. This disproportionate burden often impacts their own physical and mental health, yet it remains a deeply entrenched social norm.

20. (D) Redefining a natural life process as a hospital-managed event.
The medicalization of childbirth refers to the shift in perspective where a natural physiological event is increasingly viewed as a medical condition requiring professional management. This process involves moving the venue of birth from the home to the hospital and placing it under the control of specialists. It emphasizes technological monitoring and clinical interventions, often sidelining traditional knowledge and social rituals.

21. (A) Both A and R are true and R is the correct explanation of A.
In India, the moral obligation to care for aging parents is a fundamental social value supported by traditional family structures. The joint family system provides the necessary environment for multiple generations to live together, ensuring that the elderly receive consistent support and attention. This structural arrangement reinforces the cultural expectation that children will provide for their parents' well-being in their later years.

22. (C) Statement I is correct but Statement II is incorrect.
Collective community action is essential for the effective control of infectious diseases during public health crises. However, traditional cultural practices, which often emphasize communal gatherings and close physical proximity, can sometimes conflict with necessary preventive measures like social distancing. Successfully managing an epidemic requires navigating these cultural tensions to ensure that public health guidelines are both understood and followed.

23. (A) P-2, Q-3, R-1, S-4
Traditional explanations for illness often combine spiritual, moral, and physical concepts. The evil eye is attributed to malevolent gazes, while curses are seen as divine or supernatural punishments. Karma links suffering to past ethical behavior, and humoral imbalances suggest a disruption in the body's internal energies. These beliefs shape how individuals perceive their symptoms and choose their path to recovery.

24. (A) 1 and 2 only
Tobacco consumption in India is deeply tied to social and cultural environments, making it more than just a biological addiction. In many rural areas, smoking bidis or chewing tobacco products is a common and socially acceptable practice within peer groups across various ages. These habits are often integrated into daily social interactions, illustrating how cultural context influences health-related behaviors.

25. (C) Regular practice of Yoga and Meditation.
Certain traditional practices are specifically designed to enhance overall health and prevent the onset of disease. Yoga and meditation focus on maintaining the harmony of the mind and body through disciplined physical postures and mental exercises. These culturally rooted activities are recognized for their role in stress reduction and

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the promotion of long-term wellness, serving as effective preventive health measures.

26. (A) 2 — 3 — 1
In many rural communities, the search for a cure typically begins within the household using traditional home remedies. If symptoms persist, the next step often involves seeking help from a local faith healer or folk practitioner who shares the patient's cultural worldview. Professional medical doctors are frequently consulted only as a final resort when traditional and spiritual interventions fail to provide relief.

27. (A) Both A and R are true and R is the correct explanation of A.
The transition toward urban living has fundamentally altered health cultures by introducing significant changes in daily habits. Urban environments often promote sedentary behaviors and the consumption of highly processed, calorie-dense foods, leading to a rise in non-communicable diseases. This shift reflects how modernization and changes in the built environment can transform the health profile and lifestyle priorities of a population.

28. (B) West Bengal — Maize and meat-based diet
Regional diets in India are closely aligned with local geography and available resources. While Punjab is known for wheat and dairy, and Kerala for rice and coconut, the diet in West Bengal traditionally centers on rice and fish rather than maize. These dietary patterns are characteristic of the ecological conditions and agricultural practices prevalent in each specific geographic area.

29. (A) P-4, Q-1, R-2, S-3
Different cultural practices impact specific dimensions of human well-being and social interaction. Menstrual taboos directly affect reproductive health and hygiene, while regional diets determine nutritional status. Social isolation is a form of stigmatization for the ill, and fasting encompasses both metabolic changes and spiritual growth. Together, these elements illustrate the complex ways culture shapes the experience of health and disease.

30. (A) 1 and 2 only
Alcohol consumption is heavily influenced by cultural contexts, with patterns and attitudes varying widely across different communities. In some indigenous groups, locally brewed beverages are utilized as essential components of ritual offerings and social celebrations. While alcoholism has clear medical implications, it is also a complex social issue that cannot be addressed solely through one lens, reflecting its multifaceted nature.

31. (A) Knowledge passed through oral traditions and practice.
Folk medicine is characterized by a body of knowledge that is preserved and transmitted through generations via oral storytelling and practical experience. It relies on the use of locally available plants and traditional healing methods that are not typically standardized through modern clinical trials. This system of care remains a vital resource for communities, especially where formal medical services are inaccessible.

32. (B) Provide a framework for grieving and achieving social closure.
Cultural rituals associated with death provide a necessary structure for individuals and families to process loss and express grief. These practices facilitate social closure by honoring the deceased and reaffirming community bonds during a time of transition. By offering shared meaning and predictable patterns of behavior, these traditions help survivors navigate the emotional and social complexities of mortality.

33. (B) Ostracizing individuals with leprosy due to social stigma.
Social isolation occurs when individuals are excluded from community life due to the stigma associated with certain diseases. In the case of leprosy, historical and cultural misconceptions often led to the ostracization of affected persons, separating them from their families and social support networks. This practice is driven by fear and social prejudice rather than strictly by medical necessity or quarantine protocols.

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34. (C) Statement I is correct but Statement II is incorrect.
Homeopathy is highly regarded by many in India who seek medical treatments that are perceived as gentle and free from harsh side effects. Although it is a significant part of the healthcare landscape, it did not originate from ancient Indian Vedic traditions. Instead, it was developed in Germany during the late eighteenth century before becoming widely integrated into Indian medical culture.

35. (C) Risks of electrolyte imbalance and significant weakness.
While fasting is often practiced for spiritual or ritualistic purposes, it can have adverse physical effects if performed excessively or without proper hydration. Severe restrictions on food and water intake may lead to significant physical weakness and dangerous imbalances in essential electrolytes. These negative health outcomes highlight the potential conflict between maintaining religious devotion and ensuring the body's physiological stability.

36. (D) Family members, specifically daughters or daughters-in-law.
The responsibility for providing daily care and assistance to elderly relatives in India predominantly falls upon family members. Within this domestic framework, traditional gender expectations often place the bulk of these caregiving duties on daughters or daughters-in-law. This cultural arrangement reflects a deep-seated commitment to family-based support systems, where the needs of the aged are managed within the home environment.

37. (C) Evil Eye
The concept of the evil eye is a widespread cultural belief that malevolent or envious gazes can cause harm or illness to others, particularly vulnerable children. It is thought that even unintentional envy from admirers can lead to physical ailments. To protect against this perceived threat, various cultures utilize symbolic rituals and protective objects, reflecting a supernatural interpretation of disease causation.

38. (C) Statement I is correct but Statement II is incorrect.
Ayurveda is a holistic medical system that emphasizes the essential balance between the physical body, the mind, and the spiritual self. It utilizes a vast array of natural substances, including minerals and animal products, but heavily relies on herbal preparations as a primary therapeutic tool. This system aims to treat the whole person rather than just focusing on isolated symptoms of disease.

39. (D) Avoiding "cold" foods like curd during a fever.
Many Indian households adhere to a traditional classification of foods based on their perceived thermal effects on the body. During illnesses like fevers or colds, patients are often restricted from consuming "cold" foods such as curd or citrus fruits. This practice is rooted in the belief that such items can aggravate symptoms by disrupting the body's internal humoral balance.

40. (A) A faith healer using rituals to remove evil spirits.
An Ojha is a traditional practitioner who specializes in healing through spiritual and ritualistic means. They are often consulted to address illnesses believed to be caused by supernatural forces, curses, or evil spirits. By performing specific rituals and prayers, the Ojha seeks to restore the patient's well-being, serving as a significant figure in the folk medicine of many communities.

41. (C) Treating natural aging as a medical pathology.
Medicalization occurs when natural human experiences and life stages are redefined as medical problems requiring professional intervention. Treating the natural process of aging as a disease to be cured or managed with extensive medical technology is a prime example of this trend. It shifts the focus from social and environmental support to clinical diagnosis and pharmaceutical or surgical treatments.

42. (A) Rising consumption of fast foods and processed sugar.
Urbanization significantly transforms traditional dietary habits by increasing the accessibility and consumption of convenient, processed foods. The fast-paced urban lifestyle often leads to a decline in the preparation of traditional, home-cooked

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meals in favor of items high in refined sugars and unhealthy fats. These changes contribute to a shifting nutritional profile and the rising prevalence of lifestyle-related health conditions.

43. (D) Use of Hookah as a symbol of status and communal bonding.
In various rural settings, the use of tobacco is deeply embedded in social structures and communal traditions. The practice of sharing a hookah, for example, often serves as a significant symbol of social status and a medium for communal bonding among elders. This cultural acceptance makes tobacco use a complex social habit that is reinforced through regular community interactions and rituals.

44. (A) Both Statement I and Statement II are correct.
Yoga and meditation are ancient cultural practices that have gained worldwide recognition for their significant contributions to physical and mental health. These disciplines focus on achieving a state of balance and inner peace through controlled breathing, physical postures, and mindfulness. Their effectiveness in reducing stress and improving overall well-being is supported by both traditional wisdom and modern scientific research.

45. (C) Stopping medication once symptoms disappear based on logic.
Cultural misunderstandings about the nature of illness can lead to treatment non-compliance, such as when patients stop taking prescribed medications immediately after their symptoms improve. This behavior is often based on the logical but medically incorrect assumption that the absence of pain or discomfort signifies a complete cure. Such practices can lead to incomplete recovery and the development of drug resistance.

46. (D) Collective action and adherence to public health guidelines.
Effectively managing an epidemic requires a high degree of social responsibility, where individuals prioritize the health of the community over personal convenience. This involves collective adherence to public health guidelines, such as vaccination and quarantine measures, to prevent the spread of infection. Such cooperation is essential for protecting vulnerable populations and ensuring the overall stability of the public health system.

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47. (A) Genetic mutation in DNA sequences.
Traditional Indian folk beliefs often attribute the causes of disease to spiritual, moral, or supernatural factors. Concepts such as the wrath of deities, the influence of the evil eye, or the consequences of past sins (Karma) are common explanations. In contrast, modern scientific concepts like genetic mutations in DNA are generally absent from these traditional frameworks for understanding human illness.

48. (A) Both Statement I and Statement II are correct.
The diversity of food habits across India is primarily determined by regional geography and the specific climate of each area. In coastal regions, the abundance of water and suitable land makes rice and fish natural staples of the local diet. These culinary traditions are a direct reflection of how communities adapt their nutritional practices to the resources available in their environment.

49. (B) Cultural shame and a lack of disposal infrastructure.
Menstrual hygiene management in schools is frequently compromised by a combination of social and physical barriers. Cultural shame surrounding menstruation often prevents open discussion and education, while a lack of private toilets and disposal facilities makes it difficult for girls to manage their cycles safely. These challenges can lead to decreased school attendance and significant impacts on reproductive health.

50. (A) Family members provide most long-term care and support.
The concept of the family as the primary care unit emphasizes that most long-term support and daily assistance for the sick and elderly occur within the home. Relatives are the ones who manage medications, provide emotional comfort, and assist with physical needs. This decentralized approach to care highlights the critical role of social networks in maintaining individual health and well-being.

51. (C) Washing hands with water before meals as a ritual requirement.
Hand washing is often practiced as a ritual requirement before meals in many Indian households, blending hygiene with cultural tradition. This habit is passed down through generations as a standard of purity and social etiquette. By integrating sanitation into daily rituals, these cultural norms help facilitate consistent hygiene practices that contribute to the prevention of various infectious diseases within the community.

52. (A) Both A and R are true and R is the correct explanation of A.
Religious sites like dargahs and temples are frequent destinations for individuals seeking relief from chronic or terminal conditions. Faith healing offers a vital source of psychological comfort and hope, especially when conventional medical treatments appear ineffective or culturally distant. These spiritual practices provide a sense of agency and emotional support that complements the physical aspects of health management in many societies.

53. (C) Vitamin B12 deficiency.
While strict vegetarian diets offer many health benefits, they can lead to specific nutritional gaps if not carefully balanced. A significant concern is the potential for Vitamin B12 deficiency, as this essential nutrient is primarily found in animal-sourced foods. Without fortified products or supplements, long-term adherence to a purely plant-based diet may impact neurological function and the production of red blood cells.

54. (D) Statement I is incorrect but Statement II is correct.
Cultural food taboos during illness are often based on traditional beliefs rather than rigorous scientific evidence. While these restrictions are deeply respected, they can sometimes have negative health consequences by preventing patients from consuming the very nutrients they need for recovery. Recognizing this tension is important for healthcare providers to ensure that cultural sensitivities do not compromise the patient's nutritional stability.

55. (A) P-2, Q-1, R-4, S-3
Understanding key terms in health culture involves identifying the social and behavioral context of various practices. Fasting is the voluntary avoidance of food, while a taboo represents a prohibited behavior. Compliance refers to how well a patient follows medical advice, and a barrier is anything that obstructs access to care or effective communication between the provider and the patient.

56. (A) 1 and 2 only
Regional diets in India are characterized by unique staples and preparation methods suited to local climates. Punjab is famous for its maize-based roti and mustard greens, while Odisha has a strong tradition of consuming fermented rice known as pakhala. Conversely, coconut remains a fundamental ingredient in South Indian cuisine, contrary to misconceptions that its use is rare or limited in that region.

57. (C) Understanding local beliefs to improve trust and compliance.
For healthcare workers, cultural competency involves the ability to recognize and respect the local beliefs and traditions of the populations they serve. Understanding these perspectives is essential for building trust and ensuring that patients are willing to comply with medical treatments. By bridging the gap between professional medicine and community values, practitioners can provide more effective and patient-centered care.

58. (A) Linkage to religious devotion and purification of the soul.
Fasting, or Vrat, is a significant cultural practice in India that is primarily motivated by religious devotion and the desire for spiritual purification. It is often seen as a way to gain divine merit or exercise self-discipline over the physical body. Beyond its spiritual aims, the practice also creates a sense of shared identity and social bonding within various religious communities.

59. (A) Both A and R are true and R is the correct explanation of A.
The birth of a child in many Indian cultures is marked by elaborate rituals and the distribution of specific foods to the community. These practices serve a vital social function by bringing

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family and neighbors together to support the new mother and celebrate the new addition. Such communal engagement helps reduce the isolation often felt during the postpartum period and reinforces family bonds.

60. (B) Faith healing is based on modern germ theory.
Faith healing is a traditional practice rooted in spiritual and supernatural beliefs rather than modern medical concepts like germ theory. In contrast, systems like Ayurveda and Homeopathy are formally recognized under the AYUSH framework in India. Additionally, the link between chronic tobacco use and oral cancers is a well-established scientific fact, highlighting the diverse influences present in India's complex health culture.

61. (A) P-2, Q-1, R-4, S-3
Traditional dishes are often symbolic of the regional identity and agricultural output of different Indian states. Dhokla is a staple in Gujarat, while Litti Chokha is iconic to Bihar. Fish curry with rice is the primary dietary pattern in West Bengal, and Makki ki Roti is characteristic of Punjab. These preferences reflect the historical and ecological diversity of India's culinary landscape.

62. (A) 1 and 3 only
Caregiving is frequently viewed as a natural responsibility of women, stemming from traditional domestic roles. This social expectation often results in a significant emotional and physical burden, leading to higher stress levels among female family members. While men do participate, the primary expectation for long-term bedside care usually remains with women, illustrating the deeply gendered nature of household health support systems.

63. (A) Using turmeric paste for healing wounds.
Folk medicine involves the use of traditional remedies that have been passed down through generations, such as applying turmeric paste to wounds for its healing properties. These practices rely on local knowledge and natural resources rather than the advanced technology or pharmaceutical drugs used in modern medicine. Such remedies remain widely utilized due to their accessibility and deep roots in cultural history.

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64. (B) Leprosy
Throughout history, leprosy has been uniquely associated with severe social isolation and stigma. Affected individuals were often forced to live in separate colonies, away from their families and communities, due to profound fear and lack of medical understanding. This practice of ostracization highlights how cultural misconceptions about contagion and "impurity" can significantly impact the lives and dignity of the sick.

65. (A) Both A and R are true and R is the correct explanation of A.
Doctors who understand the traditional "Hot and Cold" classification of foods can better communicate with patients who hold these beliefs. This awareness allows practitioners to negotiate dietary recommendations that align with the patient's cultural worldview, increasing the likelihood of adherence. By respecting these internal frameworks, medical professionals can build stronger rapport and ensure that nutritional advice is both practical and acceptable.

66. (C) Statement I is correct but Statement II is incorrect.
Urbanization often leads to a shift from joint to nuclear families, which can erode traditional community-based support systems for health. In urban settings, smaller household units often find it more challenging to provide constant care for elderly or ill relatives due to work commitments and the lack of an extended family network. This transition creates new pressures on individual caregivers and formal health services.

67. (C) High rates of unnecessary Cesarean sections.
While the medicalization of childbirth has significantly improved safety and reduced mortality, it has also led to an increase in unnecessary surgical interventions. High rates of Cesarean sections are often cited as a negative consequence of treating birth as a high-risk medical procedure. This trend can result in longer recovery times and higher costs without always providing a clear medical benefit to the mother.

68. (D) Fear that specific foods like papaya might cause miscarriage.
Food taboos during pregnancy are often driven by deep-seated fears regarding the safety of the developing fetus. In various cultures, specific items like papaya or pineapple are avoided due to the belief that their perceived thermal properties might induce miscarriage. These dietary restrictions are intended as a protective measure for the mother and child, reflecting the cultural priority placed on successful childbirth.

69. (A) P-2, Q-1, R-3, S-4
Different health and lifestyle practices serve distinct purposes within a cultural and medical framework. Hand washing is a fundamental tool for preventing infection, while meditation aims to improve mental health and reduce stress. Vaccination is used to provide acquired immunity against specific diseases, and fasting is practiced for religious merit and to cultivate self-discipline, showing the variety of human health behaviors.

70. (A) 1 and 2 only
Homeopathy operates on the principle of extreme dilution, where substances are repeatedly diluted to enhance their perceived healing power. It is a highly popular choice in India for managing chronic conditions, particularly skin issues, due to its reputation for being a gentle therapy. Despite its widespread use, the system was developed in Europe and was not a product of ancient India.

71. (D) Interventions must be culturally acceptable to be effective.
Culture is a critical factor in health because it determines how individuals perceive and respond to medical interventions. For any public health program to be truly effective, it must be designed to be culturally acceptable and sensitive to local beliefs. If a treatment or preventive measure conflicts with deeply held values, it is likely to be rejected or ignored by the community.

72. (A) Progression of the disease to a more severe stage.
When individuals delay seeking professional medical help, they allow the underlying disease to progress without proper intervention. This can lead to the worsening of symptoms and the development of complications that are more difficult and expensive to treat. Cultural beliefs that favor spiritual cures or home remedies over early clinical consultation often contribute to these delays, impacting the final health outcome.

73. (A) Both A and R are true and R is the correct explanation of A.
The widespread use of gutkha in India poses a major public health challenge due to its association with oral diseases and cancer. Its persistence is heavily influenced by cultural factors, as the product is deeply integrated into daily social interactions and is readily available at a low cost. This social normalization makes it difficult for individuals to quit and for health programs to succeed.

74. (A) Both Statement I and Statement II are correct.
The belief in the evil eye is a significant cultural phenomenon where envy is thought to cause physical illness or misfortune. To protect against this perceived threat, many individuals in India utilize protective amulets, known as taveez, or perform specific rituals. These practices reflect a traditional worldview where health is influenced by the spiritual energy and intentions of those in one's social environment.

75. (D) Ayurveda — Chinese Medicine
Ayurveda is an indigenous Indian system of medicine, distinct from traditional Chinese medicine, although both emphasize holistic wellness. Other systems like Yoga focus on physical health through postures, while meditation centers on mental focus. Homeopathy is defined by its use of highly diluted substances. Each of these practices belongs to a different philosophical and historical tradition, reflecting the global diversity of medical knowledge.

76. (A) 1 and 2 only
Menstrual hygiene management is often hindered by cultural beliefs that label the process as a state of impurity, leading to significant social restrictions. Many girls face difficulties in school due to inadequate facilities, which can contribute to higher dropout rates. While sanitary pads are becoming more common, they are not yet the universally accepted or primary method used in all rural areas.

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77. (C) They serve as the primary decision-makers and caregivers.
In the Indian healthcare context, the family plays a central role as the primary source of support and decision-making for a patient. Relatives are heavily involved in selecting treatment options, providing bedside care, and ensuring that medical advice is followed. This collective approach to health reflects the social importance of the family unit, which often acts as the patient's strongest advocate.

78. (D) Increased rates of obesity and hypertensive conditions.
Urbanization has contributed to a significant increase in lifestyle-related health conditions such as obesity and hypertension. These trends are driven by shifts toward more sedentary occupations and a diet increasingly composed of high-calorie, processed foods. The urban environment often limits opportunities for regular physical activity while promoting a fast-paced, high-stress way of life, all of which impact long-term physiological health.

79. (A) Both A and R are true and R is the correct explanation of A.
In many remote tribal areas, folk medicine remains the most accessible health resource because it is physically closer and more culturally familiar than modern clinics. Modern healthcare facilities are often located far from these communities and may use language or procedures that feel alienating to tribal groups. Consequently, traditional healers are often the first and only point of contact for medical needs.

80. (D) Statement I is incorrect but Statement II is correct.
Attitudes toward alcohol consumption vary significantly across the diverse religious and cultural landscape of India. While some faiths discourage its use, many tribal communities utilize locally brewed alcoholic beverages as essential components of their social and religious ceremonies. This highlight the fact that alcohol use is not universally prohibited but is often shaped by the specific traditions and values of different groups.

81. (B) Hoarding essential medications during a severe supply shortage.
Social responsibility in health involves actions that prioritize the well-being of the entire community, such as donating blood or adhering to quarantine rules. Conversely, hoarding essential medications during a shortage is a self-serving behavior that harms others by limiting their access to necessary care. Such actions are inconsistent with the principles of collective duty and mutual support during public health crises.

82. (A) Differing cultural views on the underlying cause of disease.
A significant barrier to effective clinical communication arises when the doctor and patient hold fundamentally different cultural views on the causes of illness. If a patient believes a spiritual force is responsible while the doctor focuses only on biological factors, it can lead to mistrust or misunderstanding. Bridging these differing perspectives is essential for developing a treatment plan that the patient can follow.

83. (C) A is true but R is false.
Vegetarianism in India is frequently rooted in the ethical principle of ahimsa, which emphasizes non-violence toward all living beings. This cultural value influences the dietary choices of many individuals, particularly those following Hindu, Jain, or Buddhist traditions. However, dietary preferences are personal and cultural choices and are not mandated by the Indian Constitution, which protects individual freedom regarding such private lifestyle matters.

84. (A) 1 and 2 only
Cultural rituals around death are essential for helping families cope with the emotional and social impacts of loss. Choices between cremation and burial are typically guided by religious beliefs and provide a sense of order and spiritual completion. Although modern hospitals manage the physical aspects of dying, they have not replaced the fundamental need for these cultural traditions in the grieving process.

85. (C) Respect autonomy and seek culturally acceptable alternatives.
When a patient refuses a medically necessary treatment due to religious beliefs, the ethical approach is to respect their personal autonomy.

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Healthcare providers should seek to understand the patient's concerns and explore culturally acceptable medical alternatives whenever possible. This process of negotiation helps maintain the doctor-patient relationship while ensuring that the patient's values and rights are prioritized in the care plan.

86. (C) Statement I is correct but Statement II is incorrect.
Ayurveda is a comprehensive medical system that tailors treatment to an individual's unique physical and mental constitution, known as Prakriti. Rather than simply addressing isolated symptoms, it seeks to identify and treat the underlying causes of imbalance within the body. This holistic approach emphasizes long-term wellness and the prevention of disease by promoting harmony between the individual and their environment.

87. (D) Using mustard oil for traditional cooking in Eastern India.
Regional dietary patterns in India are often defined by the specific cooking oils and staples that are available locally. In Eastern India, particularly in states like West Bengal and Odisha, the use of mustard oil is a defining cultural characteristic of traditional cuisine. These preferences are shaped by local agricultural production and have been integrated into the regional identity over many generations.

88. (A) It reduces the transmission of fecal-oral diseases.
Washing hands before meals is a critical hygiene practice that significantly reduces the transmission of diseases spread through the fecal-oral route. By removing pathogens from the hands, this simple action prevents them from being ingested during eating. This practice, often integrated into cultural rituals, serves as a vital and effective tool for maintaining individual and community health across different populations.

89. (A) Both A and R are true and R is the correct explanation of A.
Socialization in many Indian families often emphasizes a self-sacrificing role for women, where the needs of others are prioritized over their own. This cultural expectation can lead women to ignore their own health symptoms or delay seeking treatment to avoid disrupting domestic responsibilities. These deeply ingrained gender norms create a significant barrier to women's physical and mental well-being within the household.

90. (A) 1 only
Urbanization has broadened the range of food options available to individuals, introducing a wide variety of global and processed choices. However, traditional food habits are not inherently unhealthy; many regional diets are well-balanced and nutritionally rich. Furthermore, cultural food choices are not static and often evolve over time in response to changing social, economic, and environmental conditions within a society.

91. (D) Chronic illnesses and unexplained mental health issues.
Faith healing at religious sites is most frequently sought for chronic illnesses and unexplained mental health issues that may not have responded well to conventional medicine. These conditions often carry significant emotional and social weight, making spiritual intervention a comforting and culturally appropriate choice for many. By providing hope and a sense of divine support, these practices address the psychological aspects of long-term suffering.

92. (B) Fasting to the point of severe dehydration.
While many cultural practices like yoga and meditation are designed to promote wellness, certain rituals can have detrimental effects if carried to extremes. Fasting that leads to severe dehydration or physical collapse is an example of a practice that can compromise health rather than enhance it. This highlights the importance of balancing traditional devotion with the maintenance of essential physiological needs.

93. (C) Statement I is correct but Statement II is incorrect.
The joint family system has historically provided a robust framework for social security and care for the elderly in India. However, the rise of nuclear families in urban areas has a significant impact on this support structure, often making it more difficult to provide consistent care within the home. This transition forces communities to find new ways to ensure the well-being of the aged.

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94. (D) Defining non-medical problems as medical conditions.
Medicalization is the social process through which conditions and behaviors that were once considered normal life events or social issues are redefined as medical problems. This shift allows medical professionals to diagnose and treat these occurrences using clinical and pharmaceutical methods. It often expands the authority of the healthcare system into various aspects of daily life, including aging, childbirth, and behavior.

95. (A) Both A and R are true and R is the correct explanation of A.
The success of large-scale health initiatives like the pulse polio program depends heavily on the active participation of the local community. Cultural and religious leaders often hold significant influence and can encourage people to accept vaccinations and other interventions. By engaging these trusted figures, health programs can overcome cultural barriers and ensure that their services are utilized by the target population.

96. (B) The traditional ritual of bathing in sacred rivers.
Bathing in sacred rivers is a significant cultural and religious practice in India that is often associated with the concept of ritual purity and spiritual cleansing. While primarily a spiritual act, it also involves a physical hygiene component that is deeply embedded in the cultural tradition. Such practices illustrate the close historical connection between religious beliefs and the maintenance of physical cleanliness.

97. (C) Statement I is correct but Statement II is incorrect.
Tobacco use is frequently initiated within peer groups, where social pressure and the desire for social bonding play a significant role. While it is a widespread health issue, patterns of use are not uniform across the country. In many regions, smoking remains much more common among men than women, highlighting how gender and social norms influence health behaviors differently across India.

98. (A) Ayurveda — Homeopathy
Ayurveda and Homeopathy are distinct systems of medicine with completely different historical origins and philosophical foundations. While both are included in the AYUSH framework, they operate on unique principles of diagnosis and treatment. In contrast, an Ojha is correctly associated with faith healing, and Yoga is focused on general wellness. Karma is often culturally viewed as a spiritual cause of disease.

99. (C) Pluralistic system where multiple traditions coexist.
Indian health culture is best described as a pluralistic system where multiple medical and healing traditions coexist and are often used simultaneously. Individuals may seek treatment from modern allopathic doctors while also utilizing Ayurveda, Homeopathy, or local folk remedies. This diversity reflects a society that integrates ancient wisdom with contemporary science, allowing people to choose from a wide range of therapeutic options.

100. (D) Belief in supernatural causes of disease.
When individuals seek spiritual cures before or alongside medical treatment, it is often driven by a belief in the supernatural causes of illness. In many cultures, skin conditions or unexplained ailments are thought to be the result of divine displeasure or spiritual imbalances. This perspective leads people to prioritize religious rituals and faith healing as a primary way to address the root cause of their suffering.

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CHAPTER 06

Social Prejudice and Stigmatized Diseases

1. According to Erving Goffman, social stigma is best defined as:
(A) A physical deformity that prevents normal movement.
(B) An attribute that is discrediting and reduces the individual to a tainted status.
(C) A psychological condition where an individual feels superior to others.
(D) A legal status assigned to individuals who have committed a crime.

2. Read the following statements and answer the question.
Statement I: Felt stigma refers to the fear of being discriminated against.
Statement II: Enacted stigma refers to actual experiences of discrimination and prejudice.
(A) Statement I is correct, but Statement II is incorrect.
(B) Statement I is incorrect, but Statement II is correct.
(C) Both Statement I and Statement II are correct.
(D) Both Statement I and Statement II are incorrect.

3. Which of the following is an example of 'courtesy stigma' as described in sociological literature?
(A) A person with HIV being denied a job in a competitive professional environment.
(B) A person fearing they will be judged by the public for having a TB diagnosis.
(C) The family of a person with mental illness being shunned by the community.
(D) A cancer patient receiving financial support from a non-governmental organization.

4. How does social stigma primarily affect health-seeking behavior in individuals with stigmatized diseases?
(A) It encourages early diagnosis to avoid future public embarrassment.
(B) It has no significant impact on how individuals access medical care.
(C) It increases the chance of individuals joining community health efforts.
(D) It leads to treatment delay and non-disclosure to avoid social isolation.

5. Match the terms in List I with their descriptions in List II and select the correct answer using the codes given below:
List I: (Term)
P. Felt Stigma
Q. Enacted Stigma
R. Courtesy Stigma
S. Self-Stigma
List II: (Description)
1. Direct experience of unfair treatment
2. Internalization of negative social labels
3. Anticipated fear of societal rejection
4. Stigma by association with an affected person
(A) P-3, Q-1, R-4, S-2
(B) P-1, Q-2, R-3, S-4
(C) P-4, Q-3, R-2, S-1
(D) P-2, Q-4, R-1, S-3

6. Which of the following is NOT a recognized mode of HIV transmission?
(A) Unprotected sexual contact with an infected person.
(B) Sharing common utensils or handshaking with an infected person.
(C) Transfusion of contaminated blood.
(D) Sharing needles or syringes with an infected person.

7. Which factor contributes most significantly to the high social stigma associated with HIV/AIDS in India?
(A) The high cost of medication for modern antiretroviral therapy.
(B) The lack of effective treatment centers located in rural areas.
(C) The rapid transmission of the virus through

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everyday casual contact.
(D) The perception of the disease as being linked to immoral behavior.

8. Which of the following statements accurately describes discrimination against People Living with HIV (PLHIV) in the healthcare sector?
(A) Discrimination involves unnecessary referral or breach of confidentiality.
(B) Healthcare providers often prioritize patients based on perceived social status.
(C) Modern medical ethics have largely addressed HIV stigma in urban hospitals.
(D) Disclosure of status is generally encouraged for coordinating specialized care.

9. What is a common consequence of workplace discrimination for individuals living with HIV?
(A) Guaranteed job security through mandatory government employment quotas.
(B) Increased base salary to cover the cost of chronic medical expenses.
(C) Termination of employment based primarily on the person's health status.
(D) Mandatory leadership roles in workplace health and safety committees.

10. The following question consists of two statements—Assertion (A) and Reason (R). Answer the question by selecting the appropriate option.
Assertion (A): Women often face a higher degree of social rejection than men when diagnosed with HIV/AIDS.
Reason (R): Gender dimensions of stigma are influenced by traditional societal expectations regarding female purity and moral conduct.
(A) Both A and R are true and R is the correct explanation of A.
(B) Both A and R are true but R is not the correct explanation of A.
(A) is true but R is false.
(A) is false but R is true.

11. Which of the following is NOT a provision of the HIV/AIDS (Prevention and Control) Act, 2017?
(A) It prohibits discrimination against PLHIV in employment and healthcare.
(B) It mandates that no person shall be compelled to disclose their HIV status except by a court order.
(C) It provides for the appointment of an Ombudsman by state governments to handle complaints.
(D) It permits schools to expel students based solely on their HIV positive status.

12. In the context of HIV stigma, the rejection of an individual by their own family is often termed as:
(A) Institutional stigma
(B) Primary group rejection
(C) Internalized prejudice
(D) Social exclusion

13. Identify the INCORRECT pair regarding health stigma and its social manifestation:
(A) HIV/AIDS — Association with perceived moral deviance
(B) Cancer — Fear of contagion and the idea of bad karma
(C) Leprosy — Modern medical acceptance and lack of exclusion
(D) Mental Illness — Family shame and intentional concealment

14. Which myth is most commonly associated with cancer stigma in certain rural communities?
(A) Cancer is caused by a lack of vitamin D.
(B) Cancer is purely a genetic disorder with no environmental factors.
(C) Cancer can only be treated with herbal remedies.
(D) Cancer is a contagious disease that can spread through touch.

15. Consider the following statements regarding the HIV/AIDS (Prevention and Control) Act, 2017:
1. It prohibits the use of HIV testing as a pre-requisite for employment.
2. It mandates the protection of the property of children affected by HIV/AIDS.
3. It makes it a criminal offense to discriminate against PLHIV in healthcare services.
Which of the statements given above are correct?
(A) 1 and 2 only
(B) 2 and 3 only
(C) 1 and 3 only
(D) 1, 2, and 3

16. What is a primary social consequence of the 'fear of contagion' myth regarding cancer?

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(A) Patients are encouraged to join local community support groups.
(B) Patients experience social isolation and avoidance by neighbors.
(C) Family members provide more intensive and personal physical care.
(D) The total economic cost of medical treatment decreases for families.

17. Which of the following best describes the economic burden of cancer as a driver of family stigma?
(A) Families are proud to spend their savings on life-saving treatments.
(B) High treatment costs leading to resentment of the patient as a burden.
(C) Government subsidies have significantly reduced the financial stress of cancer.
(D) Economic burden leads to the immediate social elevation of the patient's family.

18. Which statement is correct regarding Tuberculosis (TB) stigma in India?
(A) It leads to concealment, resulting in incomplete treatment and resistance.
(B) TB is seen as a disease of the elite and carries no social consequences.
(C) TB stigma involves significantly lower social repercussions for women than men.
(D) TB is no longer a stigmatized condition due to the success of DOTS.

19. How does TB stigma specifically affect marriage prospects in Indian society?
(A) A history of TB is viewed as a sign of physical resilience.
(B) TB patients are given preference in matrimonial choices.
(C) Diagnosis leads to cancelled marriage alliances or divorce for women.
(D) Marital status has no correlation with TB-related social stigma.

20. Arrange the following historical developments in the social perception of Leprosy in chronological order:
1. Introduction of Multi-Drug Therapy (MDT) reducing physical deformity.
2. Absolute social exclusion and the establishment of "leper colonies."
(A) 1—2
(B) 2—1
(C) 1 and 2 occurred simultaneously
(D) Sequence depends on the specific region

21. Historically, leprosy stigma was primarily driven by:
(A) The high cost of medication for long-term treatment.
(B) The rapid airborne transmission of the specific bacteria.
(C) Visible deformities and the belief it was a divine curse.
(D) Its association with modern or urban social lifestyles.

22. Which of the following is a current challenge in leprosy eradication despite medical cures being available?
(A) The bacteria has become immune to all known antibiotics.
(B) Social exclusion and prejudice prevent early medical diagnosis.
(C) Leprosy is now only transmitted through contaminated water.
(D) There are no diagnostic tests available for leprosy in India.

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23. Regarding social prejudice and mental illness, 'family shame' often results in:
(A) Early intervention and seeking professional psychiatric help.
(B) Public celebration of the individual's unique health status.
(C) Increased community funding for local mental health clinics.
(D) Hiding the family member and delaying medical consultation.

24. Which of the following is a key provision of the Mental Healthcare Act, 2017?
(A) It provides the right to access government-funded mental healthcare.
(B) It criminalizes suicide attempts under all medical circumstances.
(C) It allows families to institutionalize patients without their consent.
(D) It prohibits the use of any medication for psychiatric illnesses.

25. Match the conditions in List I with the social misconceptions in List II and select the correct answer using the codes given below:
List I: (Disease/Condition)
P. Epilepsy
Q. Cancer
R. HIV/AIDS
S. TB
List II: (Dominant Social Misconception)
1. Contagious through air/coughing alone
2. Result of moral transgression
3. Spirit possession or "evil eye"
4. Highly contagious via touch
(A) P-3, Q-4, R-2, S-1
(B) P-1, Q-2, R-3, S-4
(C) P-4, Q-3, R-2, S-1
(D) P-2, Q-4, R-1, S-3

26. The following question consists of two statements—Assertion (A) and Reason (R). Answer the question by selecting the appropriate option.
Assertion (A): People with epilepsy often face significant barriers in employment and education.
Reason (R): Social misconceptions frequently equate epilepsy with intellectual disability or madness.
(A) Both A and R are true and R is the correct explanation of A.
(B) Both A and R are true but R is not the correct explanation of A.
(A) is true but R is false.
(A) is false but R is true.

27. Disability stigma is often rooted in:
(A) Excessive government spending on specific disability infrastructure.
(B) The misconception that physical disability is always contagious.
(C) The high intelligence of individuals with various physical disabilities.
(D) A focus on 'normalization' and perceiving the body as 'broken.'

28. Consider the following statements regarding addiction and social labeling:
1. Addiction is often viewed as a moral failure rather than a chronic health condition.
2. Social labeling of addicts as 'criminals' helps in their speedy rehabilitation.
3. Prejudice against addicts prevents them from seeking help due to fear of legal and social repercussions.
Which of the statements given above are correct?
(A) 1 and 2 only
(B) 1 and 3 only
(C) 2 and 3 only
(D) 1, 2, and 3

29. During the COVID-19 pandemic, 'community exclusion' was observed when:
(A) Healthcare workers were applauded by their local neighbors.
(B) Recovered patients were welcomed back with celebrations.
(C) Entry was barred for frontline workers or positive cases.
(D) The government provided free vaccines to all adult citizens.

30. The following question consists of two statements—Assertion (A) and Reason (R). Answer the question by selecting the appropriate option.
Assertion (A): Non-disclosure of a stigmatized illness can lead to increased public health risks.
Reason (R): Stigma creates a barrier to testing and contact tracing, facilitating the silent spread of infections.
(A) Both A and R are true and R is the correct explanation of A.
(B) Both A and R are true but R is not the correct explanation of A.
(A) is true but R is false.
(A) is false but R is true.

31. What is the role of media in reinforcing health-related stigma?
(A) Sensationalist portrayals and the use of stigmatizing language.
(B) Providing scientific evidence and balanced reporting of facts.
(C) Strictly following the guidelines of the Ministry of Health.
(D) Promoting the success stories of survivors and their recovery.

32. Education plays a vital role in reducing health stigma by:
(A) Identifying and isolating those who are sick in local schools.

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(B) Providing factual information that promotes empathy for others.
(C) Teaching students that all diseases are the result of poor hygiene.
(D) Encouraging students to avoid contact with people who appear unwell.

33. Match the interventions in List I with their objectives in List II and select the correct answer using the codes given below:
List I: (Intervention)
P. Community Awareness Programs
Q. HIV/AIDS Act 2017
R. Media Guidelines
S. School Education
List II: (Objective)
1. De-stigmatization through childhood learning
2. Legal protection against discrimination
3. Correcting public misconceptions at the local level
4. Responsible reporting on health issues
(A) P-3, Q-2, R-4, S-1
(B) P-1, Q-3, R-2, S-4
(C) P-2, Q-4, R-1, S-3
(D) P-4, Q-1, R-3, S-2

34. Which of the following is a competency-based strategy for a healthcare worker to reduce stigma?
(A) Practicing universal precautions to avoid selective labeling.
(B) Categorizing patients based on their perceived moral behavior.
(C) Informing the community when a patient tests positive for TB.
(D) Suggesting HIV patients be treated in isolation hospitals only.

35. Consider the following statements regarding stigma and sex workers in the context of HIV/AIDS:
1. Sex workers often face double stigma due to their occupation and their health status.
2. Targeted interventions for sex workers have been hindered by moral policing and prejudice.
3. Sex workers are the sole reason for the spread of HIV in urban India.
Which of the statements given above are correct?
(A) 1 and 2 only
(B) 2 and 3 only
(C) 1 and 3 only
(D) 1, 2, and 3

36. The following question consists of two statements—Assertion (A) and Reason (R). Answer the question by selecting the appropriate option.
Assertion (A): The Mental Healthcare Act, 2017 effectively decriminalized suicide.
Reason (R): It presumes that any person who attempts to commit suicide is under severe stress and shall not be punished.
(A) Both A and R are true and R is the correct explanation of A.
(B) Both A and R are true but R is not the correct explanation of A.
(A) is true but R is false.
(A) is false but R is true.

37. Which of the following is an example of 'enacted stigma' in the context of leprosy?
(A) A person with leprosy feeling ashamed of their specific patches.
(B) A daughter worrying that she won't find a husband in the future.
(C) A shopkeeper refusing to sell groceries to a visible patient.
(D) A doctor explaining that leprosy is not highly contagious today.

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38. Consider the following statements about Epilepsy:
1. It is a neurological disorder characterized by recurrent seizures.
2. In many parts of India, it is still attributed to supernatural causes.
3. Standard medical treatment for epilepsy is ineffective.
Which of the statements given above are correct?
(A) 1 and 2 only
(B) 1 and 3 only
(C) 2 and 3 only
(D) 1, 2, and 3

39. Which of the following best describes the primary goal of the HIV/AIDS (Prevention and Control) Act, 2017?
(A) To provide a cure for HIV/AIDS to all citizens in the country.
(B) To mandate compulsory testing for all

currently pregnant women.
(C) To establish separate residential colonies for the PLHIV group.
(D) To protect the rights of people living with and affected by HIV.

40. Which of the following is a negative social consequence of 'felt stigma' among TB patients?
(A) Self-imposed social withdrawal and depression.
(B) Increased adherence to the medical regimen.
(C) Becoming a community health advocate.
(D) Seeking a second opinion from multiple doctors.

41. Read the following statements and answer the question.
Statement I: Stigma can be a greater burden than the physical symptoms of a disease.
Statement II: Stigma often persists even after the patient is medically cured.
(A) Statement I is correct, but Statement II is incorrect.
(B) Statement I is incorrect, but Statement II is correct.
(C) Both Statement I and Statement II are correct.
(D) Both Statement I and Statement II are incorrect.

42. Which of the following is NOT a provision for PLHIV in the workplace under Indian law?
(A) Mandatory public disclosure of HIV status to all coworkers.
(B) Prohibition of termination based solely on the person's HIV status.
(C) Requirement of reasonable accommodation provided by the employer.
(D) Protection of strict confidentiality regarding personal health records.

43. Match the conditions in List I with their specific stigma aspects in List II and select the correct answer using the codes given below:
List I: (Condition)
P. Addiction
Q. Disability
R. Mental Illness
S. Cancer
List II: (Specific Stigma Aspect)
1. "Abnormal" vs "Normal" body dichotomy
2. Viewed as a choice or character flaw
3. Linked to "Pagalpan" (Madness)
4. Fear of the "death sentence" or pain
(A) P-2, Q-1, R-3, S-4
(B) P-1, Q-2, R-4, S-3
(C) P-3, Q-4, R-2, S-1
(D) P-4, Q-3, R-1, S-2

44. Which of the following describes the 'gender dimension' of HIV stigma?
(A) Men are more likely to be blamed for bringing the virus home.
(B) Women face more severe violence and abandonment upon disclosure.
(C) Men and women experience identical social consequences of diagnosis.
(D) Female sex workers are the only group that faces gendered stigma.

45. Which of the following is a common misconception about the transmission of COVID-19 that fueled community stigma?
(A) It is caused by a virus.
(B) It can be spread by asymptomatic carriers.
(C) It is a punishment for dietary habits or community groups.
(D) Frequent handwashing reduces the risk of infection.

46. The following question consists of two statements—Assertion (A) and Reason (R). Answer the question by selecting the appropriate option.
Assertion (A): Leprosy patients were traditionally excluded from general hospitals.
Reason (R): There was a deep-seated fear of contagion and lack of effective treatment like MDT in the past.
(A) Both A and R are true and R is the correct explanation of A.
(B) Both A and R are true but R is not the correct explanation of A.
(A) is true but R is false.
(A) is false but R is true.

47. In the context of stigma, what does the term 'Social Labeling' refer to?
(A) Attaching a negative stereotype to a person based on a condition.
(B) Providing a medical diagnosis to a patient in a clinical setting.

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(C) Giving an award for overcoming a specific and difficult disease.
(D) Categorizing diseases based on their clinical severity or duration.

48. Consider the following statements about community awareness programs:
1. They should involve local leaders and influencers.
2. They should focus only on the biological aspects of the disease.
3. They aim to humanize the affected individuals and normalize the condition.

Which of the statements given above are correct?
(A) 1 and 2 only
(B) 1 and 3 only
(C) 2 and 3 only
(D) 1, 2, and 3

49. Which of the following is an INCORRECT statement about the social isolation of cancer patients?
(A) It is often a result of the patient's own fear of being a burden.
(B) It is a medically recommended procedure for all cancer types.
(C) It can be caused by the misconceptions of friends and neighbors.
(D) It can lead to psychological distress and slower patient recovery.

50. Arrange the following steps in the cycle of stigma in the correct sequence:
1. Internalization (Self-stigma)
2. Labeling (Social identification of a 'difference')
3. Discrimination (Enacted stigma)
4. Stereotyping (Linking the label to negative traits)

(A) 1-2-3-4
(B) 2-4-3-1
(C) 2-3-4-1
(D) 4-2-3-1

51. Which of the following is a negative outcome of health stigma in the context of TB control in India?
(A) Increased use of face masks in public.
(B) Increased government funding for research.
(C) Patients visiting unqualified practitioners to keep secrets.
(D) Better ventilation in public transport.

52. The term "PLHIV" stands for:
(A) People Living with Human Infections and Viruses.
(B) Permanent Loss of Health in Victims.
(C) Public Leaders for Health in Villages.
(D) People Living with HIV.

53. Which of the following is a correctly matched pair of a disease and its specific social challenge?
(A) TB — Considered a sign of significant familial wealth and luxury.
(B) Cancer — Always leads to immediate and absolute legal protection.
(C) Epilepsy — Job discrimination due to seizure risk.
(D) Leprosy — Highly contagious via casual touch in the modern era.

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54. Read the following statements and answer the question.
Statement I: The Mental Healthcare Act, 2017 prohibits the use of Electroconvulsive Therapy (ECT) without muscle relaxants and anesthesia.
Statement II: The Act allows for the shackling of persons with mental illness in public places.
(A) Statement I is correct, but Statement II is incorrect.
(B) Statement I is incorrect, but Statement II is correct.
(C) Both Statement I and Statement II are correct.
(D) Both Statement I and Statement II are incorrect.

55. Which of the following are objectives of the HIV/AIDS (Prevention and Control) Act, 2017?
1. To provide for the welfare of children who are HIV-affected.
2. To mandate the segregation of PLHIV in public transport.
3. To establish an Ombudsman to inquire into complaints of discrimination.

Which of the statements given above are correct?
(A) 1 and 2 only
(B) 2 and 3 only
(C) 1 and 3 only
(D) 1, 2, and 3

56. Which of the following is the most appropriate reason why leprosy stigma persists today?
(A) Historical legacy of exclusion and fear of disfigurement.
(B) Because the disease is still considered medically incurable.
(C) Because modern medicine is not available anywhere in India.
(D) Because leprosy is the most contagious disease known to man.

57. In the context of cancer, the "economic burden" includes:
(A) Only the cost of medicines.
(B) Only the cost of government subsidies.
(C) Loss of income and treatment costs for the family.
(D) The profit made by pharmaceutical companies.

58. Which of the following is an exception to effective health stigma-reduction strategies?
(A) Compulsory isolation of all people with a skin rash.
(B) Public testimonials provided by disease survivors.
(C) Mass media campaigns against social discrimination.
(D) Sensitivity training for frontline healthcare workers.

59. A person who avoids a relative with mental illness to save their own "social reputation" is reacting to:
(A) Primary stigma
(B) Enacted stigma
(C) Self-stigma
(D) Courtesy stigma

60. Arrange these in the sequence of health-seeking behavior in a stigmatized environment:
1. Diagnosis by a medical professional.
2. Experience of early symptoms.
3. Non-disclosure and trial of home remedies.
4. Social withdrawal due to visible symptoms.
(A) 2-3-4-1
(B) 1-2-3-4
(C) 3-2-1-4
(D) 4-1-2-3

61. Which of the following is an INCORRECT statement about epilepsy?
(A) It is a non-communicable brain disorder.
(B) Many patients can lead normal lives with medication.
(C) It is always caused by bad deeds in a previous life.
(D) Stigma can be reduced through community education.

62. Disability stigma often leads to:
(A) Excessively high employment rates for all disabled citizens.
(B) Complete elimination of physical barriers in urban infrastructure.
(C) Automatic social respect and inclusion for the affected person.
(D) Barriers that prevent full participation in community life.

63. Which behavior is an example of 'internalized stigma'?
(A) A person believing they deserve sickness due to their past.
(B) A neighbor refusing to share water with a local TB patient.
(C) A hospital denying surgery to an HIV positive patient.
(D) A politician passing a law to protect the disabled group.

64. What is the primary goal of educational programs addressing leprosy?
(A) It should focus on how to build better colonies for the affected.
(B) It should emphasize that it is bacterial and curable.
(C) It should warn children to stay away from anyone with a patch.
(D) It should teach that leprosy is a hereditary condition.

65. Match the social situations in List I with the types of stigma in List II and select the correct answer using the codes given below:
List I: (Social Situation)
P. Fired from a job for being HIV+
Q. Feeling dirty and worthless after diagnosis
R. Not telling friends about a diagnosis for fear of gossip
S. Being teased because your brother is in a

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List II: (Type of Stigma)

1. Enacted Stigma
2. Felt Stigma
3. Self-Stigma
4. Courtesy Stigma

(A) P-1, Q-3, R-2, S-4
(B) P-4, Q-2, R-3, S-1
(C) P-2, Q-1, R-4, S-3
(D) P-3, Q-4, R-1, S-2

66. Which of the following is an example of competency-based behavior in reducing TB stigma?
(A) Explaining to the community that TB is an infection, not a curse.
(B) A nurse wearing two masks only when treating a TB patient.
(C) A doctor telling a patient's employer about their TB status.
(D) A neighbor reporting a coughing person to the local police.

67. Which of the following is a negative aspect of the portrayal of mental illness in popular cinema?
(A) It often provides useful and factual information on therapy.
(B) It encourages people to visit psychiatrists for their health.
(C) It uses illness for violence or comedy, reinforcing stereotypes.
(D) It shows the successful recovery of many different patients.

68. The HIV/AIDS (Prevention and Control) Act, 2017 provides a 'shared household' provision for:
(A) People who want to avoid paying their local property taxes.
(B) Doctors who refuse to treat HIV patients in their clinic.
(C) Travelers coming from abroad who need temporary housing.
(D) Minors to reside in a household and not be evicted.

69. Which statement is correct regarding the Mental Healthcare Act, 2017?
(A) It mandates that all mental health patients must be kept in closed wards.
(B) It gives the police the power to diagnose mental illness in the field.
(C) It allows for specifying treatment wishes via "Advanced Directives."
(D) It removes the right to legal aid for mentally ill persons in India.

70. The following question consists of two statements—Assertion (A) and Reason (R). Answer the question by selecting the appropriate option.
Assertion (A): Stigma associated with addiction makes it difficult for individuals to reintegrate into the workforce.
Reason (R): Employers often perceive former addicts as untrustworthy or prone to relapse despite successful rehabilitation.
(A) Both A and R are true and R is the correct explanation of A.
(B) Both A and R are true but R is not the correct explanation of A.
(A) is true but R is false.
(A) is false but R is true.

71. Which myth is associated with the 'contagion' of cancer?
(A) It is caused by genetic mutations.
(B) It is related to tobacco use.
(C) It can be detected early through screening.
(D) It can be caught by sitting next to a patient.

72. In the context of HIV, 'Sex Worker Stigma' is often compounded by:
(A) Criminalization and social disapproval of the occupation.
(B) Robust legal protections provided to the sex work profession.
(C) The exceptionally high social status of elite sex workers.
(D) The total lack of any medical or health risks in the work.

73. Which of the following is an INCORRECT pair?
(A) Mental Illness — Social Prejudice
(B) TB — Marriage Discrimination
(C) COVID-19 — Full community inclusion during peak infection
(D) HIV — Workplace Discrimination

74. 'Felt stigma' leads to 'non-disclosure' because:
(A) The patient fears the negative social consequences of diagnosis.

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(B) The patient wants to spread the disease secretly to the public.
(C) The patient does not believe they are actually medically sick.
(D) The doctor has advised them to keep it a secret from family.

75. Consider the following statements about the role of media in health stigma:
1. Media can challenge stereotypes by showing diverse stories of recovery.
2. Media always follows scientific accuracy in health reporting.
3. Sensational headlines about "deadly outbreaks" can fuel panic and stigma.

Which of the statements given above are correct?
(A) 1 and 2 only
(B) 1 and 3 only
(C) 2 and 3 only
(D) 1, 2, and 3

76. What is the primary focus of community awareness programs against health-related stigma?
(A) To collect funds for hospital buildings and medical equipment.
(B) To change negative attitudes and behaviors of the public.
(C) To distribute medicines to all villagers regardless of health.
(D) To identify and isolate sick people from the general community.

77. Which of the following is an exception to the typical impacts of stigma on cancer patients?
(A) Experiencing a significant delay in the clinical diagnosis.
(B) Voluntary social withdrawal from friends and colleagues.
(C) Guaranteed increase in familial bonding and support for all.
(D) Intense psychological distress following the initial diagnosis.

78. Mental illness related 'family shame' often leads to:
(A) Publicly seeking the best medical help available in the area.
(B) Community-led support groups for the affected family unit.
(C) A decrease in the overall cost of medical treatment for all.
(D) Locking up the individual at home to avoid social dishonor.

79. The HIV/AIDS (Prevention and Control) Act, 2017 mandates that which of the following is a prohibited ground for discrimination?
(A) HIV status.
(B) Political affiliation.
(C) Favorite sport.
(D) Educational qualification.

80. Read the following statements and answer the question.
Statement I: Leprosy is one of the oldest recorded diseases in human history.
Statement II: In modern India, leprosy is still legally a ground for divorce under some personal laws, though this is being challenged.
(A) Statement I is correct, but Statement II is incorrect.
(B) Statement I is incorrect, but Statement II is correct.
(C) Both Statement I and Statement II are correct.
(D) Both Statement I and Statement II are incorrect.

81. Which behavior indicates discrimination against PLHIV in healthcare settings?
(A) Providing the same level of care as to any other patient.
(B) Placing a visible "HIV+" sticker on the patient's hospital bed.
(C) Maintaining patient confidentiality through encrypted records.
(D) Offering comprehensive counseling services to the patient.

82. What is a common social misconception regarding epilepsy?
(A) That it is caused by being 'cursed' or 'spirit possessed.'
(B) That it is a treatable neurological condition with medication.
(C) That modern medication can effectively control most seizures.
(D) That patients can work in most professional environments.

83. Disability stigma can be reduced by:

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(A) Viewing disability as a personal tragedy for the individual.
(B) Keeping disabled children in separate school buildings only.
(C) Removing societal barriers via the 'Social Model' of disability.
(D) Ignoring the specific needs of disabled persons in public.

84. In the context of addiction, social labeling often prevents:
(A) The person from ever trying drugs again in the future.
(B) The family from spending any money on the addict's needs.
(C) The local police from making arrests in the community.
(D) Seeking professional help due to the "junkie" stereotype.

85. Match the actions in List I with the stigma reduction strategies in List II and select the correct answer using the codes given below:
List I: (Action)
P. A celebrity talking about their battle with depression
Q. A law banning discrimination against HIV+ employees
R. A workshop for teachers on epilepsy
S. A village play showing a TB patient getting cured
List II: (Stigma Strategy)
1. Legal Intervention
2. Education
3. Community Awareness
4. Role Modeling/Media
(A) P-4, Q-1, R-2, S-3
(B) P-1, Q-2, R-3, S-4
(C) P-3, Q-4, R-1, S-2
(D) P-2, Q-3, R-4, S-1

86. Which of the following is a correct statement regarding TB and its impact on marriage in India?
(A) TB has no impact on marriage in the Indian social context.
(B) Women are often sent back to parental homes or divorced.
(C) Men with TB face more marital rejection than women do.
(D) Having TB is considered a qualification for rural marriage.

87. The term 'Enacted Stigma' is synonymous with:
(A) Internal feelings.
(B) Potential fear.
(C) Hidden thoughts.
(D) Overt discrimination.

88. Which factor is most responsible for the "shame" associated with mental illness in India?
(A) The belief that it reflects poorly on the family bloodline.
(B) The high cost of modern psychiatric drugs and therapy.
(C) The lack of hospitals available for the general population.
(D) The fact that mental illness is contagious through touch.

89. Regarding 'COVID-19 stigma', which of the following was a common negative experience for survivors?
(A) Receiving a "Get Well Soon" card from the housing society.
(B) Getting priority for all future government health vaccines.
(C) Being socially boycotted even after testing negative.
(D) Being asked to share their experience on local news.

90. The following question consists of two statements—Assertion (A) and Reason (R). Answer the question by selecting the appropriate option.
Assertion (A): Stigma is a major barrier to achieving the goal of 'Ending AIDS by 2030.'
Reason (R): Stigma discourages high-risk groups from accessing testing and prevention services.
(A) Both A and R are true and R is the correct explanation of A.
(B) Both A and R are true but R is not the correct explanation of A.
(A) is true but R is false.
(A) is false but R is true.

91. Which of the following is the most appropriate way to describe the 'economic burden' of TB on a poor family?
(A) It is negligible as the government provides free medicine.

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(B) It is high because TB medicine is the most expensive medicine.
(C) It is low because TB patients do not need any special care.
(D) It is high due to lost wages and cost of travel to clinics.

92. What is a negative social consequence of 'courtesy stigma' for the children of a person with a mental illness?
(A) They get extra attention from teachers in the classroom.
(B) They may be bullied or excluded by their school peers.
(C) They are automatically given government jobs in adulthood.
(D) They are exempt from taking annual exams at school.

93. The HIV/AIDS (Prevention and Control) Act, 2017 mandates 'Informed Consent' for:
(A) Buying groceries.
(B) Traveling by bus.
(C) HIV testing and research.
(D) Attending a public meeting.

94. Which of the following is a correctly matched pair regarding leprosy?
(A) Leprosy — Highly hereditary
(B) Isolation — Compulsory lifelong confinement
(C) Leprosy — Caused by bad food
(D) MDT — Cure for Leprosy

95. Consider the following statements about education and health stigma:
1. School curriculums should include basic facts about stigmatized diseases.
2. Education can help children develop empathy towards people with disabilities.
3. Higher education level always guarantees that a person will not be prejudiced.

Which of the statements given above are correct?
(A) 1 and 2 only
(B) 2 and 3 only
(C) 1 and 3 only
(D) 1, 2, and 3

96. Which type of stigma is characterized by the individual's own adoption of negative societal views?
(A) Enacted
(B) Self-stigma
(C) Felt
(D) Courtesy

97. Which of the following is a fact about the Mental Healthcare Act, 2017?
(A) It was passed in 1947 by the first parliament of India.
(B) It replaced the previous Mental Health Act of 1987.
(C) It was abolished in 2020 by a special presidential order.
(D) It only applies to people over 60 years of age in India.

98. Non-disclosure of HIV status to a spouse is often driven by:
(A) Fear of domestic violence or immediate abandonment.
(B) A desire to cause intentional harm to the spouse.
(C) Lack of interest in the spouse's long-term health.
(D) Strict instructions from the central health government.

99. Which of the following is an example of the interaction between stigma and health-seeking behavior?
(A) A person with a cold taking rest.
(B) A person going for a health check-up.
(C) Delaying a visit due to fear of being seen as "cursed."
(D) A person taking vitamins to stay healthy in winter.

100. The ultimate objective of community awareness programs against stigma is to:
(A) Increase the number of people in public hospitals.
(B) Sell more private health insurance policies to families.
(C) Label every person with their current disease status.
(D) Create a society where status does not lead to exclusion.

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ANSWERS

1. (B) An attribute that is discrediting and reduces the individual to a tainted status.
Erving Goffman defined social stigma as an attribute that is deeply discrediting, fundamentally changing how an individual is perceived by society. It reduces the person from a whole and usual individual to a tainted, discounted one. This social process involves a significant gap between an individual's virtual social identity and their actual social identity within a community.

2. (C) Both Statement I and Statement II are correct.
Felt stigma represents the internal psychological experience of fearing discrimination or feeling shame due to a condition. In contrast, enacted stigma involves external experiences where an individual actually faces unfair treatment, prejudice, or exclusion by others. Both forms significantly impact the well-being of individuals living with chronic health conditions by creating barriers to care and support.

3. (C) The family of a person with mental illness being shunned by the community.
Courtesy stigma refers to the social disapproval or prejudice extended to people who are associated with a stigmatized individual, such as family members or close friends. This phenomenon occurs because the negative labels attached to the patient are often shared by those in their immediate circle. It frequently leads to social withdrawal and isolation for the entire family unit.

4. (D) It leads to treatment delay and non-disclosure to avoid social isolation.
Social stigma creates significant barriers to health-seeking behavior by fostering a fear of social rejection and isolation. Individuals may delay seeking medical treatment or conceal their status to avoid being labeled or discriminated against by their community. This non-disclosure can lead to worsening health outcomes and the silent spread of infectious diseases within the general population.

5. (A) P-3, Q-1, R-4, S-2
Stigma manifests in various forms including felt stigma, which is the anticipation of rejection, and enacted stigma, which refers to real instances of discrimination. Self-stigma involves the internalization of negative labels, leading to reduced self-esteem. Courtesy stigma affects those associated with the primary individual. Understanding these distinctions is crucial for developing effective interventions to support marginalized and affected populations.

6. (B) Sharing common utensils or handshaking with an infected person.
Human Immunodeficiency Virus is transmitted through specific body fluids, including blood, semen, and breast milk. Common modes involve unprotected sexual contact, contaminated blood transfusions, or sharing needles. It is medically established that HIV cannot be spread through casual social contact such as shaking hands, sharing utensils, or hugging, as the virus does not survive long outside the body.

7. (D) The perception of the disease as being linked to immoral behavior.
In India, the high social stigma surrounding HIV/AIDS is largely driven by the perception that the disease is a result of immoral or deviant behavior. Because transmission is often associated with sexual activity or drug use, those affected face moral judgment. This cultural perspective complicates public health efforts by discouraging individuals from seeking testing and treatment due to shame.

8. (A) Discrimination involves unnecessary referral or breach of confidentiality.
Discrimination against people living with HIV in healthcare settings often manifests as unnecessary referrals to other facilities or the breach of patient confidentiality. Such practices violate medical ethics and legal protections, discouraging patients from accessing necessary services. Ensuring a non-discriminatory environment is essential for maintaining the dignity of patients and

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improving health outcomes through consistent medical care and support.

9. (C) Termination of employment based primarily on the person's health status.
Workplace discrimination for individuals with HIV frequently results in the unfair termination of employment based solely on their health status. Such actions often stem from unfounded fears of transmission or negative stereotypes about productivity. Losing a job not only impacts financial stability but also worsens the psychological burden of the disease, reinforcing the cycle of poverty and social exclusion.

10. (A) Both A and R are true and R is the correct explanation of A.
Gender norms significantly influence the experience of health-related stigma, with women often facing more severe social rejection than men. Traditional societal expectations regarding female purity and moral conduct mean that an HIV diagnosis is frequently interpreted as a moral failing. This gendered perspective leads to higher rates of abandonment, domestic violence, and loss of property rights for women.

11. (D) It permits schools to expel students based solely on their HIV positive status.
The HIV/AIDS (Prevention and Control) Act, 2017, was specifically designed to safeguard the rights of affected individuals. It explicitly prohibits discrimination in educational institutions, meaning schools cannot expel or refuse admission to students based on their HIV status. The Act aims to ensure that children living with HIV have equal access to education and are protected from social exclusion.

12. (B) Primary group rejection
Primary group rejection occurs when an individual is shunned or excluded by those closest to them, such as family members. In the context of stigmatized illnesses like HIV or leprosy, this rejection is particularly devastating as it removes the person's core support system. Such exclusion within the family is often a reaction to the fear of social shame or contagion.

13. (C) Leprosy — Modern medical acceptance and lack of exclusion
While leprosy is medically curable with Multi-Drug Therapy, it continues to face significant social challenges. The belief that modern medical acceptance has eliminated exclusion is incorrect, as historical prejudices and fear of visible deformities still persist in many communities. Addressing these deep-seated social manifestations is essential for the complete integration and rehabilitation of people who have been affected by leprosy.

14. (D) Cancer is a contagious disease that can spread through touch.
In many rural communities, a prevalent myth is that cancer is a contagious disease that can spread through physical touch. This misconception leads to the social isolation of patients as neighbors and even family members avoid contact. Such myths hinder patient recovery and emotional well-being by creating a sense of being untouchable or dangerous to the local community.

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15. (D) 1, 2, and 3
The HIV/AIDS (Prevention and Control) Act, 2017, provides comprehensive legal protections for affected individuals. It prohibits mandatory HIV testing for employment or healthcare access and ensures the property rights of children are protected. Furthermore, the Act makes it a criminal offense to discriminate against people living with HIV. These provisions aim to create a supportive environment for all citizens.

16. (B) Patients experience social isolation and avoidance by neighbors.
The myth that cancer is contagious results in severe social isolation and avoidance by the community. Patients often find themselves excluded from social gatherings and daily interactions, which can lead to profound loneliness and depression. This exclusion is driven by misinformation rather than medical reality, as cancer is a non-communicable disease that cannot be transmitted through casual or physical contact.

17. (B) High treatment costs leading to resentment of the patient as a burden.
The high cost of cancer treatment creates a significant economic burden that can drive

family-level stigma. As medical expenses deplete family savings and resources, the patient may be viewed with resentment or seen as a financial liability. This perception of being a burden can damage family relationships and reduce the quality of care and emotional support the patient receives.

18. (A) It leads to concealment, resulting in incomplete treatment and resistance.
In India, the stigma associated with Tuberculosis often leads patients to conceal their symptoms and delay seeking medical help. This secrecy can result in incomplete treatment courses, which contributes to the development of drug-resistant strains of the disease. Furthermore, the fear of social repercussions affects health-seeking behavior, making it difficult for public health programs to track and treat infections.

19. (C) Diagnosis leads to cancelled marriage alliances or divorce for women.
Tuberculosis stigma has specific gendered impacts, particularly concerning marriage prospects in Indian society. A diagnosis can lead to the cancellation of marriage alliances or even divorce, especially for women. The disease is often associated with perceived physical weakness or hereditary flaws, leading to social exclusion. These marital consequences discourage many individuals from disclosing their health status to potential partners.

20. (B) 2—1
Historically, the social perception of leprosy transitioned from absolute exclusion to medical management. For centuries, the disease was met with extreme prejudice, leading to the establishment of segregated leper colonies. The subsequent introduction of Multi-Drug Therapy in the late twentieth century revolutionized treatment. This medical advancement significantly reduced physical deformities and provided a path toward social reintegration for affected individuals.

21. (C) Visible deformities and the belief it was a divine curse.
The intense stigma historically associated with leprosy was primarily driven by the visible physical deformities caused by the disease and the widespread belief that it was a divine curse. Because the condition affected the skin and limbs so noticeably, it triggered primal fears of contagion and moral judgment. These factors combined to justify the total social exclusion of individuals.

22. (B) Social exclusion and prejudice prevent early medical diagnosis.
A major challenge in eradicating leprosy today is that social prejudice and the fear of being excluded prevent individuals from seeking early medical diagnosis. Although the disease is easily curable with modern medicine, patients often hide their symptoms until permanent physical damage occurs. Overcoming this social barrier is critical for ensuring that treatment is administered before deformities develop in patients.

23. (D) Hiding the family member and delaying medical consultation.
Prejudice regarding mental illness frequently results in 'family shame,' where the household attempts to protect its social reputation by hiding the affected individual. This often leads to significant delays in seeking professional psychiatric consultation or medical treatment. Such concealment prevents early intervention and can worsen the patient's condition, while also placing immense psychological stress on the entire family unit.

24. (A) It provides the right to access government-funded mental healthcare.
The Mental Healthcare Act, 2017, is a rights-based legislation that guarantees individuals the right to access government-funded mental healthcare services. It emphasizes the dignity of patients and aims to protect them from inhuman treatment. The Act also introduces provisions like advanced directives, allowing individuals to state how they wish to be treated during a mental health period in the future.

25. (A) P-3, Q-4, R-2, S-1
Different health conditions are often associated with specific social misconceptions. Epilepsy is frequently misunderstood as spirit possession, while cancer is wrongly feared as being contagious through touch. HIV/AIDS is often linked to moral transgressions, and Tuberculosis is incorrectly thought to spread solely through

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casual air contact. Addressing these specific myths is vital for reducing the overall social stigma of these conditions.

26. (A) Both A and R are true and R is the correct explanation of A.
Individuals with epilepsy face substantial barriers in both education and employment due to widespread social misconceptions. Seizures are often wrongly equated with madness or intellectual disability, leading to unfair exclusion from schools and workplaces. These prejudices persist despite medical evidence that most people with epilepsy can lead productive lives when their condition is properly managed with consistent medical treatment.

27. (D) A focus on 'normalization' and perceiving the body as 'broken.'
Disability stigma is frequently rooted in a societal focus on 'normalization,' where bodies that do not fit a specific standard are perceived as 'broken' or 'deficient.' This perspective shifts the focus from societal barriers to the individual's perceived physical limitations. By emphasizing what a person cannot do, society justifies exclusion rather than adapting infrastructure and attitudes to accommodate diverse abilities.

28. (B) 1 and 3 only
Addiction is often viewed through a moral lens rather than being recognized as a chronic health condition. This social labeling of individuals as 'criminals' or morally weak creates significant barriers to rehabilitation. The fear of legal consequences and social prejudice prevents many from seeking professional help. Effective recovery requires shifting the focus from punishment to medical support and reducing negative stereotypes.

29. (C) Entry was barred for frontline workers or positive cases.
During the COVID-19 pandemic, community exclusion was evidenced when frontline workers and those testing positive were barred from entering their own neighborhoods. This behavior was driven by intense fear and misinformation about the virus's transmission. Such social boycotts caused significant distress to individuals who were performing essential services or recovering from the illness, highlighting the power of pandemic-related stigma.

30. (A) Both A and R are true and R is the correct explanation of A.
The non-disclosure of a stigmatized illness creates substantial public health risks by acting as a barrier to early testing and contact tracing. When individuals fear social rejection, they are more likely to hide their symptoms and avoid medical services. This secrecy facilitates the silent spread of infections within a community, making it much harder for health authorities to control outbreaks.

31. (A) Sensationalist portrayals and the use of stigmatizing language.
Media plays a dual role in shaping public perception of health issues. Sensationalist portrayals and the use of stigmatizing language can reinforce existing prejudices and create unnecessary panic. When media outlets focus on the 'deadly' or 'immoral' aspects of a disease, it deepens the social divide. Responsible reporting is necessary to provide factual information and promote empathy for those affected.

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32. (B) Providing factual information that promotes empathy for others.
Education is a powerful tool for reducing health-related stigma by providing students with factual information about various conditions. By understanding the biological causes of diseases, individuals are less likely to believe harmful myths or engage in discriminatory behavior. Furthermore, education promotes empathy and social inclusion, which are essential for building a supportive environment for those living with chronic illnesses.

33. (A) P-3, Q-2, R-4, S-1
Diverse interventions are required to tackle health stigma effectively. Community programs correct local misconceptions, while legislation like the HIV/AIDS Act provides essential legal protection against discrimination. Media guidelines ensure responsible reporting to prevent public panic. Finally, school education helps de-stigmatize health conditions from an early age by teaching children the importance of empathy and scientific facts about different diseases.

34. (A) Practicing universal precautions to avoid selective labeling.
Healthcare workers can reduce stigma by adopting competency-based strategies, such as practicing universal precautions for all patients. This approach prevents the selective labeling of individuals based on their health status and ensures that everyone receives the same standard of care. By treating all patients with equal dignity and professionalism, healthcare providers help to foster a safe and non-discriminatory environment.

35. (A) 1 and 2 only
Sex workers face a complex 'double stigma' due to their occupation and their potential health status, particularly in the context of HIV/AIDS. Targeted health interventions for this group are frequently hindered by moral policing and societal prejudice. These barriers make it difficult for sex workers to access necessary prevention and treatment services, which ultimately complicates broader public health efforts.

36. (A) Both A and R are true and R is the correct explanation of A.
The Mental Healthcare Act, 2017, effectively decriminalized suicide attempts in India by presuming that individuals who attempt suicide are under severe stress. This shift from punishment to support ensures that such individuals receive necessary mental health care rather than facing legal prosecution. It recognizes suicide as a public health issue rather than a criminal act, helping to reduce related stigma.

37. (C) A shopkeeper refusing to sell groceries to a visible patient.
Enacted stigma refers to the actual experience of discrimination and unfair treatment by others. In the context of leprosy, this might involve a patient being denied services, such as a shopkeeper refusing to sell them groceries. Such overt acts of exclusion are based on fear and misinformation, causing significant hardship and reinforcing the social marginalization of the affected individual.

38. (A) 1 and 2 only
Epilepsy is a neurological disorder characterized by recurrent seizures, yet it remains shrouded in superstition in many parts of India. It is frequently attributed to supernatural causes like spirit possession rather than medical factors. Despite these myths, standard medical treatment is highly effective for most patients. Education is essential to bridge the gap between medical reality and harmful social misconceptions.

39. (D) To protect the rights of people living with and affected by HIV.
The primary goal of the HIV/AIDS (Prevention and Control) Act, 2017, is to protect the legal and human rights of people living with and affected by the virus. By prohibiting discrimination in employment, healthcare, and education, the Act aims to reduce social stigma. It provides a legal framework for grievance redressal, ensuring that affected individuals can lead dignified lives.

40. (A) Self-imposed social withdrawal and depression.
Felt stigma can lead to severe negative social consequences for Tuberculosis patients, such as self-imposed social withdrawal and depression. The internal fear of being judged or rejected by the community causes individuals to isolate themselves even before any actual discrimination occurs. This psychological burden can hinder the recovery process and prevent patients from seeking the social support they desperately need.

41. (C) Both Statement I and Statement II are correct.
Stigma often carries a heavier burden than the physical symptoms of a disease, as it affects an individual's social identity and mental well-being. Furthermore, the social 'label' associated with a stigmatized condition can persist long after the patient has been medically cured. This lasting prejudice makes it difficult for survivors to fully reintegrate into their communities and resume their normal lives.

42. (A) Mandatory public disclosure of HIV status to all coworkers.
Under Indian law, people living with HIV are protected from mandatory public disclosure of their status in the workplace. The HIV/AIDS Act ensures strict confidentiality regarding personal health records and prohibits termination based solely on a person's HIV status. Employers are also required to provide reasonable accommodation, creating a supportive environment that allows individuals to continue working without fear of discrimination.

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43. (A) P-2, Q-1, R-3, S-4
Specific health conditions are associated with distinct stigma aspects. Addiction is often viewed as a character flaw, while disability is framed through the lens of a 'broken' body. Mental illness is frequently linked to the stereotype of madness, and cancer is often feared as an inevitable death sentence. Understanding these unique dimensions is crucial for developing targeted strategies to reduce the social prejudice.

44. (B) Women face more severe violence and abandonment upon disclosure.
The gender dimension of HIV stigma reveals that women often face much more severe social consequences upon disclosing their status. This includes a higher risk of domestic violence, abandonment by their husband, and being evicted from their homes. These harsh reactions are rooted in traditional societal expectations of female purity, making women particularly vulnerable to social exclusion and economic hardship.

45. (C) It is a punishment for dietary habits or community groups.
During the COVID-19 pandemic, stigma was fueled by the misconception that the virus was a punishment for specific dietary habits or community groups. This led to the targeting and harassment of certain populations based on their identity rather than scientific evidence. Such myths created a climate of fear and division, hindering collective public health efforts and causing unnecessary suffering for marginalized communities.

46. (A) Both A and R are true and R is the correct explanation of A.
Historically, leprosy patients were excluded from general hospitals due to a deep-seated fear of contagion and the lack of effective medical treatments like Multi-Drug Therapy. This social and medical isolation was considered necessary to protect the public. Unfortunately, this exclusion reinforced the idea that leprosy was a mysterious and shameful condition, contributing to the long-lasting stigma that still exists today.

47. (A) Attaching a negative stereotype to a person based on a condition.
Social labeling involves attaching a negative stereotype to an individual based on a specific health condition or physical attribute. This process singles out the person as 'different' from the social norm and often leads to their devaluation by the community. Labeling is the first step in the cycle of stigma, setting the stage for further prejudice, discrimination, and eventual social exclusion.

48. (B) 1 and 3 only
Effective community awareness programs should involve local leaders and influencers to gain trust and change attitudes. These programs aim to humanize affected individuals and normalize their conditions, moving beyond just the biological facts of the disease. By fostering a culture of empathy and understanding, such initiatives can successfully reduce social stigma and encourage community-wide support for those living with chronic illnesses.

49. (B) It is a medically recommended procedure for all cancer types.
Social isolation is not a medically recommended procedure for cancer, yet many patients experience it due to their own fear of being a burden or the misconceptions of others. Such isolation can lead to intense psychological distress and may even slow down the patient's recovery process. It is vital to promote the fact that cancer is non-communicable to prevent unnecessary social exclusion.

50. (B) 2-4-3-1
The cycle of stigma typically begins with labeling, where a specific difference is identified within an individual. This is followed by stereotyping, where the label is linked to negative traits. Once these traits are established, discrimination or enacted stigma occurs through unfair treatment. Finally, the individual may internalize these negative views, leading to self-stigma and a profound loss of personal self-esteem.

51. (C) Patients visiting unqualified practitioners to keep secrets.
In the context of Tuberculosis control, health stigma often results in patients visiting unqualified practitioners to keep their condition

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a secret. By avoiding public clinics where they might be recognized, individuals risk receiving improper treatment, which can lead to worsened health outcomes and the spread of drug-resistant TB. This behavior demonstrates how social fear can directly undermine national public health programs.

52. (D) People Living with HIV.
The acronym "PLHIV" stands for People Living with HIV. This person-centered terminology is used to emphasize the individual's humanity rather than defining them solely by their medical diagnosis. Using such language is an important part of reducing stigma, as it helps to challenge the 'tainted' identity often associated with the virus and promotes dignity and respect for affected individuals.

53. (C) Epilepsy — Job discrimination due to seizure risk.
Epilepsy is frequently associated with job discrimination, as employers may fear the potential risks or disruptions caused by seizures. This prejudice persists despite the fact that many individuals can lead normal professional lives when their condition is managed with medication. Addressing these workplace barriers is essential for ensuring that people with epilepsy have equal opportunities for employment and economic independence.

54. (A) Statement I is correct, but Statement II is incorrect.
The Mental Healthcare Act, 2017, introduces significant reforms to protect the dignity of patients. It prohibits the use of Electroconvulsive Therapy without muscle relaxants and anesthesia, ensuring a more humane approach to treatment. Furthermore, the Act strictly forbids the shackling of persons with mental illness, a practice that was previously common in some traditional or unregulated settings to control patients.

55. (C) 1 and 3 only
The HIV/AIDS (Prevention and Control) Act, 2017, focuses on protecting the welfare of affected individuals. Its objectives include safeguarding the rights of children affected by HIV and establishing an Ombudsman to handle complaints of discrimination. Contrary to some myths, the Act promotes inclusion and strictly prohibits the segregation of people living with HIV in public transport or any other public services.

56. (A) Historical legacy of exclusion and fear of disfigurement.
Leprosy stigma persists today primarily due to a long historical legacy of social exclusion and a deep-seated fear of physical disfigurement. For centuries, the disease was associated with visible patches and loss of limbs, leading to the belief that it was a curse. Even though modern Multi-Drug Therapy is highly effective, these ancient fears and cultural prejudices remain difficult to erase.

57. (C) Loss of income and treatment costs for the family.
The economic burden of cancer is a multi-faceted challenge that includes both the direct costs of medical treatment and the indirect loss of income for the patient and their family. These financial pressures can lead to significant stress and may even drive familial stigma if the patient is seen as an economic liability. Addressing these burdens through subsidies is essential for patient support.

58. (A) Compulsory isolation of all people with a skin rash.
Effective health stigma-reduction strategies focus on inclusion and education rather than isolation. Compulsory isolation based on physical symptoms like a skin rash would only reinforce fear and prejudice. Instead, successful strategies include public testimonials from survivors, mass media campaigns that challenge stereotypes, and sensitivity training for healthcare workers. These approaches aim to humanize the condition and promote empathy within the community.

59. (D) Courtesy stigma
When a person avoids a relative with a stigmatized condition like mental illness to protect their own social reputation, they are reacting to courtesy stigma. This type of stigma involves the social disapproval that 'rubs off' on those associated with the primary individual. Family members often feel forced to choose between supporting their loved one and maintaining their own status in society.

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60. (A) 2-3-4-1
In a stigmatized environment, health-seeking behavior often begins with the experience of early symptoms. Due to fear of social rejection, individuals frequently choose non-disclosure and may try home remedies first. As symptoms become more visible, social withdrawal often occurs to hide the condition. Eventually, the person may seek a formal diagnosis from a medical professional once symptoms can no longer be concealed.

61. (C) It is always caused by bad deeds in a previous life.
Epilepsy is a non-communicable neurological disorder, not a result of bad deeds or supernatural causes. Many individuals with epilepsy lead full and productive lives by managing their seizures with regular medication. The idea that it is a spiritual curse is a harmful myth that contributes to social isolation. Education is essential to replace these misconceptions with scientific facts and promote inclusion.

62. (D) Barriers that prevent full participation in community life.
Disability stigma creates numerous barriers that prevent individuals from fully participating in community life. These barriers can be physical, such as lack of accessible infrastructure, or social, such as negative attitudes and stereotypes. Such exclusion limits opportunities for education, employment, and social interaction. Reducing this stigma involves changing societal perceptions and creating a more inclusive environment that accommodates diverse human needs.

63. (A) A person believing they deserve sickness due to their past.
Internalized stigma occurs when an individual adopts the negative societal views and stereotypes about their condition. For example, a person might believe they deserve to be sick as a form of punishment for their past actions. This self-stigma leads to a significant loss of self-esteem and can discourage the individual from seeking the medical care and social support they need.

64. (B) It should emphasize that it is bacterial and curable.
Educational programs addressing leprosy should focus on the scientific fact that it is a bacterial infection that is easily curable with Multi-Drug Therapy. By emphasizing that the disease is not a curse and is not highly contagious, these programs can help to dismantle ancient fears. Factual information is the key to reducing the social isolation of patients and promoting reintegration.

65. (A) P-1, Q-3, R-2, S-4
Stigma manifests in several distinct ways. Being fired from a job is an example of enacted stigma, while feeling worthless reflects self-stigma. Felt stigma involves the fear of being gossiped about or judged by others. Courtesy stigma occurs when a person faces social challenges because of a family member's condition. Recognizing these patterns is essential for developing comprehensive support systems for individuals.

66. (A) Explaining to the community that TB is an infection, not a curse.
A competency-based behavior in reducing stigma involves actively challenging misconceptions with factual information. For instance, explaining that Tuberculosis is a bacterial infection rather than a divine curse helps to normalize the condition. This approach promotes a scientific understanding of health, which can reduce fear and encourage empathy. Such proactive communication is a key responsibility for healthcare workers and community leaders.

67. (C) It uses illness for violence or comedy, reinforcing stereotypes.
Popular cinema often reinforces negative stereotypes about mental illness by using it as a plot device for violence or comedy. These portrayals can lead the public to believe that people with mental health conditions are dangerous or inherently foolish. Such misrepresentations deepen the social stigma and make it harder for individuals to seek professional help without feeling deep shame or fear.

68. (D) Minors to reside in a household and not be evicted.
The HIV/AIDS (Prevention and Control) Act, 2017, includes a 'shared household' provision to protect the residential rights of affected individuals. This is particularly important for minors, ensuring they can continue to reside in their family home and cannot be evicted solely

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because of their HIV status or association. This provision aims to provide social and economic stability for vulnerable children.

69. (C) It allows for specifying treatment wishes via "Advanced Directives."
The Mental Healthcare Act, 2017, introduces the concept of "Advanced Directives," allowing individuals to specify their future treatment wishes while they have the capacity to do so. This empowers patients and ensures their autonomy is respected during a mental health crisis. The Act emphasizes a rights-based approach, focusing on the dignity and choice of the individual rather than just clinical management.

70. (A) Both A and R are true and R is the correct explanation of A.
Stigma associated with addiction significantly hinders individuals from successfully reintegrating into the workforce. Employers often harbor prejudices, perceiving former addicts as untrustworthy or highly susceptible to relapse, regardless of successful rehabilitation. This lack of trust creates a cycle of unemployment that can undermine recovery efforts. Addressing these workplace stereotypes is vital for supporting long-term social and economic stability for everyone.

71. (D) It can be caught by sitting next to a patient.
A common myth associated with cancer is that it is a contagious disease that can be caught by sitting next to or touching a patient. This belief is medically incorrect, as cancer is a non-communicable disease. Such misconceptions lead to the unnecessary social isolation of patients, depriving them of essential emotional support from their friends and community during a difficult time.

72. (A) Criminalization and social disapproval of the occupation.
Sex worker stigma in the context of HIV is often compounded by the criminalization and intense social disapproval of their occupation. This marginalization makes it extremely difficult for sex workers to access healthcare services without facing judgment or legal repercussions. The combined weight of occupational and health-related stigma creates significant barriers to effective disease prevention and support for this vulnerable population.

73. (C) COVID-19 — Full community inclusion during peak infection
During the peak of the COVID-19 pandemic, many individuals actually experienced intense social exclusion and community stigma rather than full inclusion. Healthcare workers, survivors, and those testing positive were frequently barred from their homes or neighborhoods due to fear of transmission. This highlights that even during a global crisis, health-related stigma can lead to severe social boycotts and isolation for those.

74. (A) The patient fears the negative social consequences of diagnosis.
Felt stigma often leads to non-disclosure because the patient fears the potentially devastating social consequences of their diagnosis. The anticipation of being abandoned, losing a job, or being gossiped about by neighbors causes individuals to hide their health status. This fear-driven secrecy can delay medical treatment and prevent the person from accessing necessary psychological and social support from their community.

75. (B) 1 and 3 only
Media has a significant impact on health stigma. While it can challenge stereotypes by sharing diverse stories of recovery, sensational headlines about "deadly outbreaks" often fuel public panic and prejudice. Unfortunately, media reports do not always prioritize scientific accuracy, sometimes prioritizing dramatic narratives over factual health information. Responsible journalism is essential for promoting a balanced and empathetic understanding of various conditions.

76. (B) To change negative attitudes and behaviors of the public.
The primary focus of community awareness programs is to change negative public attitudes and behaviors toward people with stigmatized illnesses. These initiatives aim to replace fear and misinformation with empathy and factual knowledge. By humanizing the affected individuals, such programs foster a more inclusive environment where health status is not a barrier to social participation or accessing essential medical care.

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(A) P-2, Q-4, R-3, S-1
(B) P-1, Q-3, R-4, S-2
(C) P-3, Q-1, R-2, S-4
(D) P-4, Q-2, R-1, S-3

8. Which of the following is NOT a benefit provided to pregnant women under the Janani Shishu Suraksha Karyakram (JSSK)?
(A) Fixed monthly salary for the duration of pregnancy.
(B) Free and cashless delivery services in public institutions.
(C) Free drugs and essential consumables for the mother.
(D) Free transport from home to health institutions and back.

9. Consider the following statements regarding the National Health Mission (NHM):
1. It encompasses two sub-missions: NRHM and NUHM.
2. The main programmatic components include Health System Strengthening in rural and urban areas.
3. It is headed by the Prime Minister at the national level executive committee.

Which of the above statement(s) is/are correct?
(A) 1 and 2 only
(B) 2 and 3 only
(C) 1 and 3 only
(D) 1, 2, and 3

10. Given below are two statements, one is labelled as Assertion (A) and the other is labelled as Reason (R):
Assertion (A): Tribal populations in India often experience "compounded health disadvantage."
Reason (R): Intersectionality explains how geography, lack of infrastructure, and cultural barriers act simultaneously to worsen health outcomes for tribes.
(A) Both A and R are true and R is the correct explanation of A.
(B) Both A and R are true but R is not the correct explanation of A.
(C) A is true but R is false.
(D) A is false but R is true.

11. Consider the following statements:
Statement I: The National Urban Health Mission (NUHM) focuses on the primary health care needs of the urban poor, particularly slum dwellers.
Statement II: NUHM is implemented as a standalone mission independent of the National Rural Health Mission's structural framework.
(A) Statement I is correct, Statement II is incorrect.
(B) Statement I is incorrect, Statement II is correct.
(C) Both statements are correct.
(D) Both statements are incorrect.

12. In the context of regional health inequality, which of the following states is typically categorized as an "Empowered Action Group" (EAG) state due to lagging health indicators?
(A) Kerala
(B) Bihar
(C) Tamil Nadu
(D) Maharashtra

13. Match the following items in List I with their descriptions in List II:
List I: (Scheme)
P. PM-JAY
Q. RSBY
R. JSSK
S. ASHA
List II: (Target Beneficiary)
1. BPL families (Pre-Ayushman Bharat)
2. Bottom 40% of the population as per SECC data
3. Sick infants up to one year of age
4. Village level community health volunteer
(A) P-2, Q-1, R-4, S-3
(B) P-1, Q-2, R-3, S-4
(C) P-2, Q-1, R-3, S-4
(D) P-4, Q-3, R-2, S-1

14. Which constitutional provision is most frequently cited by the Indian Judiciary as the basis for the "Right to Health"?
(A) Article 14
(B) Article 19
(C) Article 32
(D) Article 21

15. Given below are two statements, one is labelled as Assertion (A) and the other is labelled as Reason (R):
Assertion (A): The Ayushman Bharat PM-JAY

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awareness activities like village plays can correct local myths. These multi-level approaches are necessary to create a more supportive and inclusive society for all.

86. (B) Women are often sent back to parental homes or divorced.
Tuberculosis has a profound impact on marriage in India, particularly for women who are often sent back to their parental homes or divorced after a diagnosis. The disease is frequently viewed as a sign of physical inadequacy or a hereditary flaw, leading to severe social consequences. These gendered impacts demonstrate how health-related stigma can deeply disrupt an individual's personal life.

87. (D) Overt discrimination.
The term 'Enacted Stigma' refers specifically to overt acts of discrimination and unfair treatment directed at an individual. Unlike felt stigma, which is an internal fear, enacted stigma involves external actions such as being denied a job or being excluded from social events. These experiences are the tangible manifestations of societal prejudice and have a direct negative impact on the individual's life.

88. (A) The belief that it reflects poorly on the family bloodline.
The intense shame associated with mental illness in India is often driven by the belief that it reflects poorly on the family bloodline. This perception can damage the family's social standing and negatively affect the marriage prospects of other relatives. Consequently, many families choose to hide the illness, prioritizing their social reputation over the medical needs of the affected person.

89. (C) Being socially boycotted even after testing negative.
During the COVID-19 pandemic, many survivors experienced being socially boycotted by their neighbors even after they had tested negative and fully recovered. This persistent exclusion was driven by irrational fear and a lack of understanding about the virus. Such experiences highlight how pandemic-related stigma can continue to affect individuals long after their medical recovery, hindering their reintegration into society.

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90. (A) Both A and R are true and R is the correct explanation of A.
Stigma remains a primary barrier to achieving global goals like ending the AIDS epidemic. It discourages individuals from high-risk groups from seeking essential testing, prevention, and treatment services due to fear of judgment. Without addressing these social prejudices, the silent transmission of the virus continues. Inclusive policies and community education are necessary to ensure that everyone feels safe accessing care.

91. (D) It is high due to lost wages and cost of travel to clinics.
For a poor family, the economic burden of Tuberculosis is high due to lost wages and the recurring costs of travel to medical clinics. Even when medication is provided for free by the government, the indirect costs of the illness can be devastating. These financial pressures can exacerbate the social challenges faced by the patient, making long-term treatment adherence more difficult.

92. (B) They may be bullied or excluded by their school peers.
Children of a person with mental illness may experience courtesy stigma, which often manifests as being bullied or excluded by their school peers. This social rejection occurs because the negative labels attached to the parent are unfairly extended to the children. Such experiences can lead to emotional distress and academic difficulties, demonstrating how health-related stigma can impact the entire family.

93. (C) HIV testing and research.
The HIV/AIDS (Prevention and Control) Act, 2017, mandates that informed consent must be obtained before any HIV testing or research is conducted. This provision ensures that individuals have the right to make autonomous decisions about their own health and privacy. Protecting informed consent is a fundamental part of medical ethics and is crucial for building trust between patients and healthcare systems.

94. (D) MDT — Cure for Leprosy
Multi-Drug Therapy (MDT) is the medically established and highly effective cure for leprosy. Since its introduction, MDT has significantly

77. (C) Guaranteed increase in familial bonding and support for all.
While many families provide strong support, a diagnosis of cancer does not always guarantee an increase in familial bonding. In some cases, the high cost of treatment and the fear of death can lead to resentment or social withdrawal within the family unit. Stigma and economic burden can sometimes strain relationships rather than strengthening them, highlighting the need for comprehensive support.

78. (D) Locking up the individual at home to avoid social dishonor.
Family shame related to mental illness often results in extreme measures, such as locking up the affected individual at home to hide them from the community. This behavior is driven by the fear of social dishonor or losing the family's reputation. Such concealment prevents the person from receiving professional psychiatric care and severely violates their fundamental human rights and dignity.

79. (A) HIV status.
The HIV/AIDS (Prevention and Control) Act, 2017, explicitly mandates that HIV status is a prohibited ground for discrimination. This legal protection applies to various sectors, including employment, healthcare, and education. By making discrimination illegal, the Act seeks to ensure that people living with HIV can access services and opportunities without facing prejudice, thereby helping to reduce the overall social stigma.

80. (C) Both Statement I and Statement II are correct.
Leprosy is one of the oldest recorded diseases in human history, with a long legacy of social exclusion. In modern India, the disease has historically been a legal ground for divorce under several personal laws, reflecting ancient prejudices. Although these laws are currently being challenged and reformed, their existence demonstrates how deeply health-related stigma is embedded in legal and social systems.

81. (B) Placing a visible "HIV+" sticker on the patient's hospital bed.
Placing a visible "HIV+" sticker on a patient's bed is a clear act of discrimination and a violation of confidentiality in healthcare settings. Such actions selectively label the patient and expose their status to others without consent, reinforcing social stigma. Healthcare providers must maintain professional ethics by protecting patient privacy and ensuring that all individuals receive care in a non-discriminatory environment.

82. (A) That it is caused by being 'cursed' or 'spirit possessed.'
A common and damaging social misconception regarding epilepsy is the belief that it is caused by a curse or spirit possession. This supernatural interpretation leads to the social marginalization of patients and may cause families to seek traditional healers rather than modern medical treatment. Overcoming these myths through education is vital for ensuring that patients receive effective neurological care and support.

83. (C) Removing societal barriers via the 'Social Model' of disability.
Disability stigma can be significantly reduced by adopting the 'Social Model' of disability, which focuses on removing societal barriers rather than fixing the individual. This approach emphasizes that disability is created by inaccessible environments and negative attitudes. By making infrastructure more accessible and promoting inclusion, society can ensure that individuals with disabilities have equal opportunities to participate in community life.

84. (D) Seeking professional help due to the "junkie" stereotype.
In the context of addiction, social labeling often prevents individuals from seeking professional help because they fear being branded with the "junkie" stereotype. This negative label carries intense shame and moral judgment, making the person feel unworthy of care. Reducing this stigma involves recognizing addiction as a chronic health condition that requires medical support rather than social condemnation and punishment.

85. (A) P-4, Q-1, R-2, S-3
Different strategies are used to reduce health stigma effectively. Celebrities sharing their experiences serve as role models, while anti-discrimination laws provide a legal framework for protection. Educational workshops for teachers can reduce prejudice in schools, and community

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CHAPTER 07
Health Inequalities and Policy

1. Which of the following best defines "health inequity" as distinguished from "health inequality"?
(A) Any variation in health status between different population groups.
(B) Systematic health differences that are avoidable, unnecessary, and unjust.
(C) Differences in health that are unavoidable and naturally occurring.
(D) The statistical variance of life expectancy within a single demographic.

2. Under the National Health Policy 2017, what is the targeted timeline to increase public health expenditure to 2.5% of the GDP?
(A) By 2020
(B) By 2022
(C) By 2025
(D) By 2030

3. Which statement is correct regarding the selection process of an Accredited Social Health Activist (ASHA)?
(A) She is a permanent government employee appointed by the State Medical Board.
(B) She must have a minimum qualification of a Graduate degree in Social Work.
(C) She must be a resident of the village and preferably in the age group of 25 to 45 years.
(D) She is selected directly by the District Magistrate without community involvement.

4. Identify the INCORRECT statement regarding the Janani Suraksha Yojana (JSY):
(A) It is a 100% centrally sponsored scheme managed by the state.
(B) It integrates cash assistance with delivery and post-delivery care.
(C) It aims to reduce maternal mortality by promoting institutional birth.
(D) It provides uniform cash incentives for all women in HPS states regardless of socio-economic status.

5. Given below are two statements, one is labelled as Assertion (A) and the other is labelled as Reason (R):
Assertion (A): Health outcomes in India show a distinct social gradient where lower socio-economic groups face higher morbidity.
Reason (R): The social gradient in health implies that health inequalities are only confined to the difference between the richest and the poorest.
(A) Both A and R are true and R is the correct explanation of A.
(B) Both A and R are true but R is not the correct explanation of A.
(C) A is true but R is false.
(D) A is false but R is true.

6. Which of the following is a correctly matched pair of a health program and its primary focus?
(A) Nikshay — Targeted nutritional supplementation for expectant mothers.
(B) JSSK — Zero out-of-pocket expenditure for institutional delivery.
(C) PMMVY — Specialized mental health services for adolescent groups.
(D) RSBY — Tertiary care hospitalization for COVID-19 patients only.

7. Match the following items in List I with their descriptions in List II:
List I: (Program/Policy)
P. National Rural Health Mission
Q. Ayushman Bharat (PM-JAY)
R. PMMVY
S. NHP 2017
List II: (Key Feature)
1. Cash incentive of ₹5000 for first live birth
2. Strengthening Sub-centers into Health and Wellness Centres
3. Focus on "Health in All" policies
4. Architectural correction of the public healthcare delivery system

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38. Which of the following describes the "social gradient" in health?
(A) Health improves only once a person crosses the poverty line.
(B) Health outcomes improve at every higher level of social hierarchy.
(C) Health status is the same for all individuals regardless of income.
(D) Only the poorest and the richest show health differences.

39. What is the primary incentive for an ASHA worker under the JSY scheme?
(A) A fixed monthly salary for administrative duties.
(B) A lifetime pension scheme after five years of service.
(C) Free housing provided by the local Gram Panchayat body.
(D) Performance-linked incentives for institutional deliveries.

40. Which of the following is a criticism often leveled against the Ayushman Bharat PM-JAY scheme?
(A) Neglect of public infrastructure in favor of insurance.
(B) It focuses too much on primary healthcare and ignores larger hospitals.
(C) It provides unlimited financial coverage to the top 10% of the population.
(D) It does not cover any pre-existing diseases at the time of enrollment.

41. Which initiative specifically aims to provide "free-to-and-fro" transport for pregnant women and sick infants?
(A) JSY
(B) PMMVY
(C) JSSK
(D) RSBY

42. Wealthy vs. Poor health outcome differences are most visible in which indicator in India?
(A) Under-five mortality rates
(B) Prevalence of genetic disorders
(C) Height of the average adult
(D) Usage of traditional herbal medicine

43. Given below are two statements, one is labelled as Assertion (A) and the other is labelled as Reason (R):
Assertion (A): The National Health Policy 2017 proposes a "trust-based" model for PM-JAY.
Reason (R): It aims to provide a framework where the government pays for the healthcare services of the poor at empanelled hospitals.
(A) Both A and R are true and R is the correct explanation of A.
(B) Both A and R are true but R is not the correct explanation of A.
(C) A is true but R is false.
(D) A is false but R is true.

44. Which of the following statements about Caste-based health inequality is correct?
(A) Caste has no impact on health access since the advent of NHM policies.
(B) Marginalized groups show higher mortality than the national average.
(C) Caste-based inequality is exclusively found in the North Indian states.
(D) Reservation in public hospitals has eliminated all existing health inequities.

45. The "social gradient" in health suggests that:
(A) Only the extremely poor are unhealthy.
(B) Health is determined solely by genetics.
(C) There is a linear relationship between social status and health.
(D) Social status only affects health in developed countries.

46. Which of the following is an objective of the Revised National TB Control Programme (RNTCP)?
(A) To provide free vaccination for TB to adults.
(B) To ban all private clinics from treating TB.
(C) To focus only on rural TB cases.
(D) To achieve at least 85% cure rate of infectious cases.

47. The term "Intersectionality" in the context of health inequality was popularized to address:
(A) The overlap of multiple social disadvantages.
(B) The intersection of two highways near a hospital.
(C) The merger of NRHM and NUHM.
(D) To coordination between private and public doctors.

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scheme provides a cover of up to ₹5 lakhs per family per year.
Reason (R): The scheme is intended to reduce catastrophic out-of-pocket expenditure for secondary and tertiary care hospitalization.
(A) Both A and R are true and R is the correct explanation of A.
(B) Both A and R are true but R is not the correct explanation of A.
(C) A is true but R is false.
(D) A is false but R is true.

16. Consider the following statements about the Village Health Sanitation and Nutrition Committee (VHSNC):
1. It acts as a subcommittee of the Gram Panchayat.
2. It is responsible for creating a village health plan.
3. The ASHA worker serves as the Chairperson of this committee.

Which of the above statement(s) is/are correct?
(A) 1 and 2 only
(B) 2 and 3 only
(C) 1 and 3 only
(D) 1, 2, and 3

17. The following health initiatives were launched in India. Arrange them in the correct chronological order of their launch:
1. National Rural Health Mission (NRHM)
2. Rashtriya Swasthya Bima Yojana (RSBY)
3. Ayushman Bharat (PM-JAY)
4. National Health Policy (First Policy)

(A) 4-1-2-3
(B) 1-4-2-3
(C) 4-2-1-3
(D) 1-2-4-3

18. What is the primary role of the "Nikshay" portal in the Revised National TB Control Programme?
(A) Web-based monitoring of TB patients and treatment adherence.
(B) Distribution of free contraceptives to eligible couples.
(C) Registration of private hospitals under the PM-JAY scheme.
(D) Tracking of newborn immunization and vaccination schedules.

19. Match the following items in List I with their descriptions in List II:
List I: (Health Concept)
P. Class-based inequality
Q. Social Gradient
R. Regional Inequality
S. Gender-based inequality
List II: (Definition/Context)
1. Differences in health access between Kerala and Uttar Pradesh
2. Higher prevalence of anemia among women compared to men
3. Stepwise increase in health outcomes with increasing income
4. Differential health outcomes based on occupational status

(A) P-3, Q-4, R-2, S-1
(B) P-4, Q-1, R-3, S-2
(C) P-4, Q-3, R-1, S-2
(D) P-1, Q-2, R-4, S-3

20. Given below are two statements, one is labelled as Assertion (A) and the other is labelled as Reason (R):
Assertion (A): Ayushman Bharat – Health and Wellness Centres (HWCs) represent a shift from selective to comprehensive primary health care.
Reason (R): HWCs provide services only for maternal and child health and communicable diseases.
(A) Both A and R are true and R is the correct explanation of A.
(B) Both A and R are true but R is not the correct explanation of A.
(C) A is true but R is false.
(D) A is false but R is true.

21. Which of the following is an identifying feature of the National AIDS Control Programme (NACP) Phase IV?
(A) Complete discontinuation of NGO participation.
(B) Focus only on the rural population while ignoring urban hotspots.
(C) Integration of HIV services with the general health system.
(D) Elimination of the use of Antiretroviral Therapy (ART).

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reduced the physical deformities associated with the disease and made it possible for patients to be treated without isolation. Understanding that leprosy is a curable bacterial infection is essential for dismantling the ancient myths and social stigma that still surround the condition.

95. (A) 1 and 2 only
Education plays a vital role in reducing health stigma by including basic facts about various conditions in school curriculums. This helps children develop empathy and understanding towards people with disabilities and chronic illnesses. While education is a powerful tool, it does not always guarantee an absence of prejudice, as societal attitudes are also shaped by deeply held cultural beliefs and personal experiences.

96. (B) Self-stigma
Self-stigma occurs when an individual internalizes the negative societal views and stereotypes associated with their condition. This process can lead to a profound loss of self-esteem, feelings of worthlessness, and the belief that they deserve their illness. Internalized stigma is particularly damaging as it can discourage the individual from seeking the social support and medical care they need for recovery.

97. (B) It replaced the previous Mental Health Act of 1987.
The Mental Healthcare Act, 2017, replaced the previous Mental Health Act of 1987, introducing a more rights-based and patient-centric approach to mental health in India. It emphasizes the dignity of individuals and provides a legal framework for accessing mental healthcare as a right. The Act also includes provisions for grievance redressal and the protection of patients from inhuman or degrading treatment.

98. (A) Fear of domestic violence or immediate abandonment.
Non-disclosure of HIV status to a spouse is often driven by the intense fear of domestic violence or immediate abandonment. For many individuals, especially women, the potential social and physical repercussions of disclosure are perceived as greater than the medical risks. Addressing this fear requires a supportive environment where disclosure can occur safely, accompanied by counseling and legal protections for the individual.

99. (C) Delaying a visit due to fear of being seen as "cursed."
Stigma directly affects health-seeking behavior when an individual delays visiting a doctor due to the fear of being seen as "cursed" or "tainted" by the community. This fear of social labeling can prevent early diagnosis and treatment, leading to worsened health outcomes. Reducing stigma is therefore essential for improving public health, as it encourages individuals to access medical services.

100. (D) Create a society where status does not lead to exclusion.
The ultimate objective of community awareness programs against stigma is to create a society where an individual's health status does not lead to social exclusion. These programs aim to promote empathy, provide factual information, and challenge deep-seated prejudices. By fostering a supportive environment, communities can ensure that all individuals have equal access to care, social participation, and fundamental human rights.

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1. It refers to the overlapping of social identities like caste, gender, and poverty.
2. It helps explain why a poor woman from a tribal area faces more barriers than a wealthy man from the same area.
3. It suggests that health interventions should only target one factor at a time.

Which of the above statement(s) is/are correct?
(A) 1 and 2 only
(B) 2 and 3 only
(C) 1 and 3 only
(D) 1, 2, and 3

31. Match the following items in List I with their descriptions in List II:
List I: (Constitutional/Legal Basis)
P. Article 47
Q. State List (Schedule 7)
R. Paschim Banga Khet Mazdoor Samity Case
S. Article 243-G
List II: (Provision/Significance)
1. Public Health and Sanitation as a State subject
2. Judicial recognition of Right to Health under Article 21
3. Duty of the State to raise the level of nutrition
4. Powers of Panchayats to manage health and sanitation
(A) P-3, Q-1, R-2, S-4
(B) P-1, Q-3, R-4, S-2
(C) P-2, Q-4, R-1, S-3
(D) P-3, Q-2, R-1, S-4

32. Which of the following is a key feature of the National Mental Health Programme (NMHP)?
(A) Building large isolated mental asylums in every rural village district.
(B) Integration of mental health with general health services.
(C) Compulsory hospitalization for all persons diagnosed with mental illness.
(D) Prohibiting the private clinical practice of all registered psychiatrists.

33. The following stages represent the evolution of the National Health Mission. Arrange them in chronological order:
1. Launch of NRHM
2. Launch of NUHM
3. Launch of Ayushman Bharat
4. Implementation of NHP 2002
(A) 4-1-2-3
(B) 1-4-2-3
(C) 4-2-1-3
(D) 2-1-4-3

34. Community participation in health programs is best exemplified by:
(A) The role of VHSNC in village health planning and monitoring.
(B) The central government deciding the location of every health center.
(C) Private companies managing public health sub-centers for profit.
(D) International donors providing loans for medical equipment.

35. Which of the following is a correctly matched pair regarding Ayushman Bharat?
(A) Health and Wellness Centres — Provision of specialized tertiary care only.
(B) PM-JAY — Delivery of basic primary health care services only.
(C) Health and Wellness Centres — Screening for non-communicable diseases.
(D) PM-JAY — Exclusive health coverage for government employees.

36. In which year was the National Urban Health Mission (NUHM) launched by the Government of India?
(A) 2005
(B) 2012
(C) 2013
(D) 2017

37. Consider the following types of health inequality:
1. Regional inequality (State vs State)
2. Vertical inequality (Between different income groups)
3. Horizontal inequality (Between groups of same socio-economic status but different castes)

Which of the above statement(s) is/are addressed by the National Health Policy 2017?
(A) 1 and 2 only
(B) 2 and 3 only
(C) 1 and 3 only
(D) 1, 2, and 3

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22. Consider the following statements regarding the Pradhan Mantri Matru Vandana Yojana (PMMVY):
1. It is a conditional cash transfer scheme.
2. It provides compensation for wage loss for pregnant and lactating women.
3. It is applicable for all births of a woman.

Which of the above statement(s) is/are correct?
(A) 1 and 2 only
(B) 2 and 3 only
(C) 1 and 3 only
(D) 1, 2, and 3

23. Which of the following pairs is INCORRECTLY matched?
(A) NHP 2017 — Goal to reduce TFR to 2.1
(B) JSY — Focus on safe motherhood
(C) PM-JAY — World's largest government-funded health insurance scheme
(D) VHSNC — Urban Slum Management Committee

24. A person from a marginalized caste group is denied treatment at a local clinic despite having a valid insurance card. This situation primarily illustrates:
(A) Health Inequity based on social discrimination.
(B) Health Inequality based on geography.
(C) Economic efficiency of the private sector.
(D) Voluntary exclusion from health services.

25. Given below are two statements, one is labelled as Assertion (A) and the other is labelled as Reason (R):
Assertion (A): Public healthcare is often preferred for achieving equity over private healthcare in India.
Reason (R): Private healthcare providers are primarily driven by profit motives, which may lead to the exclusion of those who cannot pay.
(A) Both A and R are true and R is the correct explanation of A.
(B) Both A and R are true but R is not the correct explanation of A.
(C) A is true but R is false.
(D) A is false but R is true.

26. Match the following items in List I with their descriptions in List II:
List I: (Disease Control)
P. TB Control
Q. AIDS Control
R. Mental Health
S. Child Health
List II: (Specific Strategy)
1. Targeted Interventions for High Risk Groups
2. DOTS (Directly Observed Treatment Short-course)
3. Home-Based Newborn Care (HBNC)
4. De-institutionalization and Community Care

(A) P-2, Q-1, R-4, S-3
(B) P-1, Q-2, R-3, S-4
(C) P-4, Q-3, R-2, S-1
(D) P-2, Q-4, R-1, S-3

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27. Which of the following is NOT a core objective of the National Rural Health Mission (NRHM)?
(A) Reduction in Infant Mortality Rate (IMR)
(B) Universal access to public health services
(C) Population stabilization
(D) Privatization of all district-level hospitals

28. What is the frequency of training modules typically provided to ASHAs to enhance their competency in community health?
(A) Only once during induction without any mandatory follow-up sessions.
(B) Periodic training through a series of modular courses.
(C) Mandatory daily training sessions conducted at the District Hospital.
(D) Training provided only if the worker fails her initial skills evaluation.

29. Consider the following statements:
Statement I: The Rashtriya Swasthya Bima Yojana (RSBY) used smart cards to provide paperless transactions to beneficiaries.
Statement II: RSBY has been completely merged into the Ayushman Bharat PM-JAY scheme.
(A) Statement I is correct, Statement II is incorrect.
(B) Statement I is incorrect, Statement II is correct.
(C) Both statements are correct.
(D) Both statements are incorrect.

30. Consider the following statements regarding "Intersectionality" in health:

48. Match the following items in List I with their descriptions in List II:
List I: (Category)
P. Tribal Health
Q. Gender
R. Regional
S. Class
List II: (Specific Health Barrier)
1. Low female autonomy in seeking care
2. Geographical isolation in hilly terrains
3. Lack of purchasing power for medicines
4. Lack of tertiary hospitals in backward districts
(A) P-1, Q-2, R-3, S-4
(B) P-2, Q-1, R-4, S-3
(C) P-4, Q-3, R-2, S-1
(D) P-2, Q-4, R-1, S-3

49. Which of the following is an essential component of the Ayushman Bharat – Health and Wellness Centres?
(A) Major surgical procedures.
(B) Screening for Hypertension and Diabetes.
(C) Open-heart surgeries.
(D) International medical tourism services.

50. The National Health Mission aims to achieve a "Communitization" of health. This is primarily done through:
(A) Strengthening the VHSNC and ASHA.
(B) Hiring more doctors from foreign countries.
(C) Increasing the price of medicines in the market.
(D) Handing over all hospitals to NGOs.

51. Given below are two statements, one is labelled as Assertion (A) and the other is labelled as Reason (R):
Assertion (A): Regional health inequality is high between Kerala and Bihar.
Reason (R): Kerala has historically invested more in primary education and health infrastructure.
(A) Both A and R are true and R is the correct explanation of A.
(B) Both A and R are true but R is not the correct explanation of A.
(C) A is true but R is false.
(D) A is false but R is true.

52. In the context of PMMVY, the cash incentive is provided in how many installments?
(A) One single installment
(B) Two installments
(C) Three installments
(D) Five installments

53. Which of the following is a "Negative" indicator of health equity?
(A) High institutional delivery rate
(B) Increased doctor-to-population ratio
(C) High out-of-pocket expenditure (OOPE)
(D) High immunization coverage

54. The concept of "Right to Health" in India is derived from:
(A) The Directive Principles of State Policy (Article 47)
(B) Fundamental Rights (Article 21)
(C) Both (A) and (B)
(D) Neither (A) nor (B)

55. Under Ayushman Bharat PM-JAY, how are beneficiaries identified?
(A) Through a nationwide merit-based entrance examination.
(B) Based on current monthly income certificates from the tehsil.
(C) Through a formal self-declaration of poverty by the household.
(D) Based on the Socio-Economic Caste Census (SECC) 2011 data.

56. Consider the following statements about the National Health Policy 2017:
1. It advocates for a shift from "sick-care" to "wellness."
2. It aims to reduce the prevalence of tobacco use by 30% by 2025.
3. It recommends a centralized health system with no role for states.
Which of the above statement(s) is/are correct?
(A) 1 and 2 only
(B) 2 and 3 only
(C) 1 and 3 only
(D) 1, 2, and 3

57. Which of the following pairs is INCORRECTLY matched?
(A) ASHA — Village level
(B) ANM — Sub-centre level
(C) VHSNC — District level
(D) Medical Officer — PHC level

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(A) 1 and 3 only
(B) 1 and 2 only
(C) 2 and 3 only
(D) 1, 2, and 3

91. Match the following items in List I with their descriptions in List II:
List I: (Term)
P. Out-of-pocket expenditure
Q. Universal Health Coverage
R. Comprehensive Primary Care
S. Targeted Interventions
List II: (Context)
1. Health and Wellness Centres
2. NACP strategy for high-risk groups
3. Costs paid by the individual at the time of service
4. Ensuring no one is left behind in health access
(A) P-4, Q-3, R-2, S-1
(B) P-1, Q-2, R-4, S-3
(C) P-2, Q-1, R-3, S-4
(D) P-3, Q-4, R-1, S-2

92. Which of the following is a key feature of the "Pradhan Mantri Matru Vandana Yojana"?
(A) It covers all children of the family.
(B) It provides ₹5,000 for the first living child.
(C) It is only for women above the age of 30.
(D) It is a scheme for urban women only.

93. Arrange the following in the order of the referral chain in the Indian public health system (from lowest to highest):
1. Community Health Centre (CHC)
2. Sub-Centre / Health and Wellness Centre
3. District Hospital
4. Primary Health Centre (PHC)
(A) 2-4-1-3
(B) 4-2-1-3
(C) 2-1-4-3
(D) 1-2-4-3

94. Which of the following is a "Competency-based" role of an ASHA?
(A) Performing an emergency C-section.
(B) Prescribing high-end antibiotics.
(C) Managing the district hospital's finances.
(D) Counseling mothers on breastfeeding and immunization.

95. Given below are two statements, one is labelled as Assertion (A) and the other is labelled as Reason (R):
Assertion (A): The National Health Policy 2017 emphasizes "Digital Health."
Reason (R): Digital health can help in tracking patient outcomes and reducing regional health disparities.
(A) Both A and R are true and R is the correct explanation of A.
(B) Both A and R are true but R is not the correct explanation of A.
(C) A is true but R is false.
(D) A is false but R is true.

96. Which of the following is an INCORRECT pair regarding health programs?
(A) RNTCP — Tuberculosis
(B) PM-JAY — Primary Health only
(C) NACP — HIV/AIDS
(D) NMHP — Mental Health

97. The "Social Gradient" in health suggests that:
(A) Health status is a simple binary between the poor and the rich.
(B) Incremental status gains lead to better health outcomes.
(C) Socio-economic status does not matter for long-term health.
(D) Only the established middle class is considered truly healthy.

98. Which of the following is a common criticism of the RSBY scheme?
(A) Low enrollment and limited impact on reducing out-of-pocket costs.
(B) The scheme was considered far too successful by administrators.
(C) It was designed to cover only permanent government employees.
(D) It was exclusively implemented within the state of Kerala only.

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99. Consider the following statements:
Statement I: Community participation ensures that health programs are culturally acceptable.
Statement II: The VHSNC is the primary vehicle for community participation under the NHM.
(A) Statement I is correct, Statement II is incorrect.
(B) Statement I is incorrect, Statement II is

66. What is the role of a "DOTS provider" in the TB control program?
(A) Ensuring patients swallow TB medication in their presence.
(B) To perform complex lung surgeries in specialized hospitals.
(C) To sell TB medicines at a discounted price to the public.
(D) To conduct mass media campaigns for TB awareness in the district.

67. Which of the following statements about the "Right to Health" is INCORRECT?
(A) The Supreme Court has linked it to the constitutional "Right to Life."
(B) It includes the mandatory right to emergency medical care for all.
(C) It is an explicit Fundamental Right in the 1950 Constitution.
(D) State governments have the primary responsibility for public health.

68. Consider the following statements about Ayushman Bharat PM-JAY:
1. There is no cap on family size or age of members.
2. It covers pre-hospitalization and post-hospitalization expenses.
3. It is only applicable in government-run hospitals.
Which of the above statement(s) is/are correct?
(A) 1 and 2 only
(B) 2 and 3 only
(C) 1 and 3 only
(D) 1, 2, and 3

69. Which of the following is a primary focus of the National AIDS Control Programme (NACP)?
(A) Mandatory isolation of all HIV patients.
(B) Providing expensive private care to all citizens.
(C) Awareness, prevention, and free ART treatment.
(D) Discouraging the use of condoms.

70. Given below are two statements, one is labelled as Assertion (A) and the other is labelled as Reason (R):
Assertion (A): The ASHA worker is a key link between the community and the public health system.
Reason (R): She is a trained female community health activist who lives in the same village.
(A) Both A and R are true and R is the correct explanation of A.
(B) Both A and R are true but R is not the correct explanation of A.
(C) A is true but R is false.
(D) A is false but R is true.

71. Regional health inequality is often measured using which of the following?
(A) Comparing the number of cinema halls per state population.
(B) Analyzing the specific color of the state's official flag.
(C) Measuring the average annual amount of rainfall in the state.
(D) Infant Mortality Rate (IMR) differences between various states.

72. Under JSSK, what is the duration for which free treatment is provided to sick infants?
(A) Up to 30 days after birth
(B) Up to 1 year of age
(C) Up to 5 years of age
(D) Up to 18 years of age

73. Match the following items in List I with their descriptions in List II:
List I: (Target)
P. Institutional Delivery
Q. Wage loss compensation
R. Secondary/Tertiary care cover
S. Village Health Plan
List II: (Policy/Program)
1. JSY
2. PMMVY
3. PM-JAY
4. VHSNC
(A) P-2, Q-1, R-4, S-3
(B) P-4, Q-3, R-2, S-1
(C) P-1, Q-2, R-3, S-4
(D) P-3, Q-4, R-1, S-2

74. Which of the following is the most appropriate reason for the merger of NRHM and NUHM into the National Health Mission (NHM)?
(A) To ensure a unified approach to health system strengthening.
(B) To save money by terminating half of the administrative staff.

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58. What is the main objective of the "Janani Shishu Suraksha Karyakram" (JSSK)?
(A) Elimination of out-of-pocket expenses for target groups.
(B) To provide free and compulsory education to the girl child.
(C) To provide comprehensive health insurance for elderly citizens.
(D) To build new medical colleges in rapidly growing urban areas.

59. Given below are two statements, one is labelled as Assertion (A) and the other is labelled as Reason (R):
Assertion (A): The private healthcare sector in India is often criticized for "medical pluralism."
Reason (R): It provides the majority of secondary and tertiary care but is largely unregulated in terms of costs and quality.
(A) Both A and R are true and R is the correct explanation of A.
(B) Both A and R are true but R is not the correct explanation of A.
(C) A is true but R is false.
(D) A is false but R is true.

60. Which of the following represents an INCORRECT pair of a health program and its year of launch?
(A) NRHM — 2005
(B) RSBY — 2008
(C) Ayushman Bharat — 2018
(D) National Health Policy — 2021

61. Gender-based health inequality in India is often manifested as:
(A) Higher nutritional status among girls compared to boys.
(B) Higher life expectancy for men than women in all states.
(C) Neglect of female health needs due to patriarchal social norms.
(D) Equal access to sports and fitness for both genders.

62. Match the following items in List I with their descriptions in List II (based on NHP 2017 targets):
List I: (Policy Goal)
P. Eliminate Leprosy
Q. Eliminate Kala-azar
R. Reduce Maternal Mortality Ratio (MMR) to 100
S. Reduce Total Fertility Rate (TFR) to 2.1
List II: (Target Year)
1. 2025
2. 2018
3. 2017
4. 2020
(A) P-1, Q-2, R-3, S-4
(B) P-2, Q-3, R-4, S-1
(C) P-3, Q-4, R-1, S-2
(D) P-2, Q-3, R-1, S-4

63. Which of the following is NOT a component of the National Health Mission's structural framework?
(A) Indian Space Research Organisation
(B) District Health Society
(C) Rogi Kalyan Samiti
(D) Village Health Sanitation and Nutrition Committee

64. Consider the following statements:
Statement I: The social gradient in health means that the poorest have the worst health and the richest have the best health.
Statement II: This gradient is only observed in infectious diseases, not in chronic diseases like heart disease.
(A) Statement I is correct, Statement II is incorrect.
(B) Statement I is incorrect, Statement II is correct.
(C) Both statements are correct.
(D) Both statements are incorrect.

65. Given below are two statements, one is labelled as Assertion (A) and the other is labelled as Reason (R):
Assertion (A): Janani Suraksha Yojana (JSY) is a demand-side intervention.
Reason (R): It provides a cash incentive to the mother to encourage her to seek institutional delivery.
(A) Both A and R are true and R is the correct explanation of A.
(B) Both A and R are true but R is not the correct explanation of A.
(C) A is true but R is false.
(D) A is false but R is true.

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technology for treatments.
(D) It is exclusively found in remote and underdeveloped rural areas.

83. Match the following items in List I with their descriptions in List II:
List I: (Scheme)
P. JSSK
Q. RSBY
R. NMHP
S. NACP
List II: (Key Component)
1. Mental Health Care
2. Free Drugs and Consumables for pregnant women
3. HIV/AIDS Prevention
4. Smart Card for BPL families
(A) P-1, Q-2, R-3, S-4
(B) P-4, Q-3, R-2, S-1
(C) P-2, Q-4, R-1, S-3
(D) P-3, Q-1, R-4, S-2

84. What is the role of the "Village Health Sanitation and Nutrition Committee" (VHSNC)?
(A) To perform minor and major surgeries in the rural village setting.
(B) To collect property and income taxes from all the local villagers.
(C) To build and maintain local roads and bridges for the community.
(D) Local monitoring and planning for health and sanitation.

85. Given below are two statements, one is labelled as Assertion (A) and the other is labelled as Reason (R):
Assertion (A): Caste-based health inequality is a form of horizontal inequality.
Reason (R): It occurs between groups who may have similar income levels but differ in social status and access.
(A) Both A and R are true and R is the correct explanation of A.
(B) Both A and R are true but R is not the correct explanation of A.
(C) A is true but R is false.
(D) A is false but R is true.

86. Which of the following is NOT covered under the benefits provided by Ayushman Bharat PM-JAY?
(A) Treatment of all pre-existing chronic or acute diseases.
(B) Cosmetic surgery for aesthetic purposes.
(C) Specialized oncology treatment for various types of cancer.
(D) Advanced cardiology procedures for heart-related ailments.

87. The "National Mental Health Programme" was launched to provide:
(A) Modernized large and isolated district mental asylums.
(B) Free housing and accommodation for the mentally ill.
(C) Identification and arrest of all people with mental disorders.
(D) Mental health services at the primary healthcare level.

88. Which of the following statements about ASHA training is true?
(A) Continuous skill enhancement for maternal and child care.
(B) It is a mandatory one-day course with no further assessment.
(C) It only involves learning how to fill out administrative forms.
(D) ASHAs are trained by private companies for a designated fee.

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89. Consider the following statements:
Statement I: The Janani Suraksha Yojana (JSY) provides a higher incentive to women in "Low Performing States" (LPS).
Statement II: LPS are states that have low institutional delivery rates.
(A) Statement I is correct, Statement II is incorrect.
(B) Statement I is incorrect, Statement II is correct.
(C) Both statements are correct.
(D) Both statements are incorrect.

90. Consider the following statements about "Health Inequity":
1. It is based on the principle of social justice.
2. It refers only to the biological differences between people.
3. Reducing inequity requires addressing the "Social Determinants of Health."
Which of the above statement(s) is/are correct?

(C) To prioritize urban health infrastructure over rural health.
(D) To simplify the naming convention for the general public's use.

75. Given below are two statements, one is labelled as Assertion (A) and the other is labelled as Reason (R):
Assertion (A): Wealthy families in India have better health outcomes than poor families.
Reason (R): Wealthy families have better access to nutrition, clean water, and quality healthcare services.
(A) Both A and R are true and R is the correct explanation of A.
(B) Both A and R are true but R is not the correct explanation of A.
(C) A is true but R is false.
(D) A is false but R is true.

76. "Nikshay Poshan Yojana" provides which of the following to TB patients?
(A) Free books and educational materials regarding TB and nutrition.
(B) Monthly financial incentive of ₹500 for nutritional support.
(C) Free memberships to local fitness centers and gyms for patients.
(D) Only providing cooked meals at government-run health centers.

77. Which of the following is a characteristic of health "Inequality" that is NOT necessarily an "Inequity"?
(A) A poor person dying of a preventable disease while a rich person survives.
(B) Lack of hospitals in tribal areas compared to cities.
(C) A younger person having better hearing than an elderly person.
(D) Higher maternal mortality among marginalized castes.

78. Consider the following statements:
Statement I: The National Health Policy 2017 aims for "Universal Health Coverage."
Statement II: Universal Health Coverage implies that all people receive the health services they need without suffering financial hardship.
(A) Statement I is correct, Statement II is incorrect.
(B) Statement I is incorrect, Statement II is correct.
(C) Both statements are correct.
(D) Both statements are incorrect.

79. Consider the following about the "Social Gradient":
1. It shows that health is a continuum.
2. It implies that only the bottom 10% need health interventions.
3. It suggests that even the middle class has worse health than the very wealthy.

Which of the above statement(s) is/are correct?
(A) 1 and 3 only
(B) 1 and 2 only
(C) 2 and 3 only
(D) 1, 2, and 3

80. Given below are two statements, one is labelled as Assertion (A) and the other is labelled as Reason (R):
Assertion (A): Tribal health outcomes are often poor due to "Geographical Exclusion."
Reason (R): Many tribal habitations are in remote, hilly, or forested areas with poor transport links to health centers.
(A) Both A and R are true and R is the correct explanation of A.
(B) Both A and R are true but R is not the correct explanation of A.
(C) A is true but R is false.
(D) A is false but R is true.

81. Which of the following is an identifying feature of "Health and Wellness Centres" (HWCs)?
(A) They are only located in metropolitan cities.
(B) They provide a package of 12 essential health services.
(C) They are managed exclusively by private insurance companies.
(D) They do not provide any maternal health services.

82. In the "Public vs. Private" healthcare debate, which is a major concern regarding the private sector?
(A) Lack of accountability and unnecessary medical procedures.
(B) It focuses primarily on curative rather than preventive services.
(C) It does not utilize modern medical

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correct.
(C) Both statements are correct.
(D) Both statements are incorrect.

100. What is the main goal of the Janani Suraksha Yojana (JSY)?
(A) To provide free nutritional food to all growing children.
(B) To provide free mobile phones to mothers for health tracking.
(C) To build more private hospitals in underdeveloped rural areas.
(D) To promote institutional delivery among poor pregnant women.

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ANSWERS

1. (B) Systematic health differences that are avoidable, unnecessary, and unjust.
Health inequity represents a specific category of health differences that are not merely biological or random. It focuses on systematic variations arising from social, economic, or environmental disadvantages. Unlike general inequality, which refers to any variation, inequity specifically targets those disparities that society deems unfair and preventable through public policy and collective action.

2. (C) By 2025
The National Health Policy of 2017 outlines a comprehensive roadmap for strengthening India's healthcare system. A central fiscal goal is the gradual increase of public spending on health to reach two and a half percent of the gross domestic product. This target is set for achievement by the year twenty-twenty-five to ensure sustainable financing.

3. (C) She must be a resident of the village and preferably in the age group of 25 to 45 years.
The selection of an Accredited Social Health Activist is deeply rooted in community integration. The guidelines stipulate that she must belong to the village she serves to ensure trust and accessibility. Eligible candidates are usually women aged between twenty-five and forty-five who have completed at least the eighth grade to facilitate effective health communication.

4. (D) It provides uniform cash incentives for all women in HPS states regardless of socio-economic status.
The Janani Suraksha Yojana utilizes a targeted approach rather than a uniform one. Cash incentives vary significantly based on whether a state is classified as High Performing or Low Performing. Additionally, in High Performing States, the assistance is often restricted to specific socio-economic categories like below poverty line households or scheduled castes and tribes.

5. (C) A is true but R is false.
Health outcomes in India demonstrate a clear social gradient where morbidity and mortality risks decrease as socio-economic status rises. This phenomenon is not limited to a simple divide between the wealthiest and the poorest individuals. Instead, it reflects a continuous and stepwise improvement in health across every successive level of income, education, and social hierarchy.

6. (B) JSSK — Zero out-of-pocket expenditure for institutional delivery.
The Janani Shishu Suraksha Karyakram is specifically designed to eliminate all out-of-pocket expenses for pregnant women and sick infants. By providing free drugs, diagnostics, and transport, it removes the financial barriers associated with institutional deliveries. This initiative complements existing schemes by ensuring that clinical care at public health facilities is completely free for these groups.

7. (D) P-4, Q-2, R-1, S-3
India's healthcare landscape is defined by diverse policies and programs with specific focuses. The National Rural Health Mission introduced architectural corrections in the delivery system, while Ayushman Bharat transformed sub-centers into wellness hubs. Meanwhile, the maternity benefit scheme provides five thousand rupees for the first birth, and the current health policy prioritizes integrating health across all sectors.

8. (A) Fixed monthly salary for the duration of pregnancy.
The Janani Shishu Suraksha Karyakram focuses on providing free services at the point of care rather than providing a direct monthly income. Its benefits include complimentary diagnostics, medications, and transport services for pregnant women. Direct cash transfers for wage loss or nutritional support are typically handled under different schemes like the maternity benefit program or insurance.

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9. (A) 1 and 2 only
The National Health Mission serves as an umbrella program integrating rural and urban health initiatives through its two primary sub-missions. It emphasizes strengthening the overall health system and improving service delivery across various regions. While it operates under national guidelines, the executive leadership typically involves administrative heads and health ministers rather than the prime minister directly.

10. (A) Both A and R are true and R is the correct explanation of A.
Tribal communities often face multiple, overlapping disadvantages that significantly deteriorate their health status. Intersectionality helps analyze how factors like geographical isolation, cultural differences, and economic marginalization work together to create unique barriers. This compounded effect explains why simple interventions often fail and why specialized, culturally sensitive healthcare strategies are necessary for improving outcomes in tribal populations.

11. (A) Statement I is correct, Statement II is incorrect.
The National Urban Health Mission specifically targets the primary healthcare needs of the urban poor and those living in slums. However, it is not a standalone mission independent of the broader framework. Instead, it operates as a sub-mission under the National Health Mission alongside its rural counterpart to ensure a comprehensive national strategy for health.

12. (B) Bihar
The Empowered Action Group comprises states that have historically lagged in socio-economic and health indicators. Bihar is a prominent member of this group, characterized by high fertility and mortality rates compared to national averages. In contrast, states like Kerala and Tamil Nadu are recognized for having more advanced healthcare systems and significantly better demographic and health outcomes.

13. (C) P-2, Q-1, R-3, S-4
Different Indian health schemes target various segments of the population. The prime minister's insurance scheme covers the bottom forty percent based on census data, whereas the older insurance model targeted families below the poverty line. Furthermore, the safety net for infants ensures free care for the sick, while community volunteers act as vital village-level health links.

14. (D) Article 21
Although the Indian Constitution does not explicitly state a fundamental right to health, the judiciary has interpreted it as an integral part of the right to life. Article twenty-one, which guarantees the protection of life and personal liberty, has been expanded through various Supreme Court judgments to include the right to live with dignity and health.

15. (A) Both A and R are true and R is the correct explanation of A.
The Pradhan Mantri Jan Arogya Yojana provides a substantial annual cover of five lakh rupees per family. This financial protection is specifically designed to prevent families from falling into poverty due to high costs at hospitals. By covering secondary and tertiary care, the scheme directly addresses the issue of catastrophic out-of-pocket spending in the country.

16. (A) 1 and 2 only
The Village Health Sanitation and Nutrition Committee is a pivotal body for decentralized health planning and community monitoring. It functions as a subcommittee within the local self-government framework to address specific health and hygiene needs. While the community volunteer is a key member and convener, she does not typically hold the official position of the committee chairperson.

17. (A) 4-1-2-3
The evolution of India's health initiatives follows a specific timeline starting with the first National Health Policy in 1983. This was followed by the launch of the National Rural Health Mission in 2005 to strengthen rural infrastructure. Subsequently, the first national health insurance for the poor began in 2008, eventually leading to the comprehensive Ayushman Bharat in 2018.

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18. (A) Web-based monitoring of TB patients and treatment adherence.
The Nikshay portal is a centralized digital platform used for the management and tracking of tuberculosis cases across India. it allows healthcare providers to register patients, monitor their treatment progress, and ensure adherence to medication protocols. This system is essential for real-time data collection and improving the overall effectiveness of the national tuberculosis elimination program.

19. (C) P-4, Q-3, R-1, S-2
Health inequalities manifest through various social and economic dimensions. Occupational status often defines class-based differences, while the social gradient describes how health improves progressively with higher income. Regional variations are seen in disparities between states like Kerala and Uttar Pradesh. Lastly, gender-based inequality is evident in the disproportionately high rates of anemia found among women.

20. (C) A is true but R is false.
The establishment of Health and Wellness Centres marks a significant transition toward providing comprehensive primary care rather than just selective services. These centers are designed to deliver a wide range of care, including screening for non-communicable diseases and mental health. Therefore, the suggestion that they only focus on maternal health and communicable diseases is factually incorrect.

21. (C) Integration of HIV services with the general health system.
The fourth phase of the National AIDS Control Programme emphasized the sustainability of interventions by moving away from standalone facilities. A key strategy involved integrating HIV prevention and treatment services into the existing general healthcare infrastructure. This approach aimed to reduce stigma, improve service accessibility, and ensure long-term institutional support for individuals living with the human immunodeficiency virus.

22. (A) 1 and 2 only
The Pradhan Mantri Matru Vandana Yojana is a conditional cash transfer program aimed at supporting pregnant women. It provides financial compensation to mitigate wage loss during the later stages of pregnancy and after childbirth. However, the scheme is specifically restricted to the first living child of the mother rather than being applicable to every single birth.

23. (D) VHSNC — Urban Slum Management Committee
The Village Health Sanitation and Nutrition Committee is a rural-focused body operating at the village level within the Panchayati Raj system. It is not an urban slum management entity. In contrast, other pairings like the target for fertility rates, the focus of motherhood schemes, and the scale of the national insurance program are correctly matched with their goals.

24. (A) Health Inequity based on social discrimination.
When a patient is denied medical care due to their social identity despite having the means to pay or valid insurance, it represents a clear case of health inequity. This situation arises from social injustice and discriminatory practices rather than biological differences or personal choices. Such barriers prevent marginalized groups from accessing the care they are rightfully entitled to receive.

25. (A) Both A and R are true and R is the correct explanation of A.
In the pursuit of health equity, the public sector is often viewed as the primary vehicle because it prioritizes service delivery over financial gain. Private providers, being market-driven, may naturally exclude those unable to afford high costs. This profit motive can lead to disparities where the most vulnerable populations are left without access to essential medical services.

26. (A) P-2, Q-1, R-4, S-3
Specific public health challenges require specialized strategies for effective management. Tuberculosis control relies on directly observed treatment to ensure compliance, while AIDS prevention focuses on high-risk groups. Mental health services have shifted toward community care and de-institutionalization. Additionally, child health is significantly improved through home-based care models that provide essential support for newborns and their mothers.

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27. (D) Privatization of all district-level hospitals
The National Rural Health Mission was launched to revitalize the public health delivery system through increased funding and structural reforms. Its core objectives include reducing infant and maternal mortality and achieving population stabilization. The mission focuses on strengthening government facilities to ensure universal access, which is the opposite of a policy aimed at privatizing all district-level hospitals.

28. (B) Periodic training through a series of modular courses.
To maintain high standards of community healthcare, ASHAs undergo structured and continuous capacity building. Their training is not a one-time event but consists of several modular courses delivered over time. these modules cover essential topics like maternal care, newborn health, and disease prevention, ensuring that the workers' skills remain updated and relevant to community needs.

29. (C) Both statements are correct.
The Rashtriya Swasthya Bima Yojana pioneered the use of smart cards to facilitate cashless and paperless hospitalization for poor families. As the healthcare landscape evolved, this scheme was eventually integrated into the more expansive Ayushman Bharat program. This merger allowed for a more comprehensive and streamlined national health insurance framework for the country's most vulnerable populations.

30. (A) 1 and 2 only
Intersectionality recognizes that multiple social factors like caste, gender, and economic status do not act in isolation. Instead, they overlap to create unique experiences of disadvantage and health barriers. Therefore, effective health interventions must address these multiple factors simultaneously rather than focusing on just one aspect, as a person's health is influenced by their entire social identity.

31. (A) P-3, Q-1, R-2, S-4
The legal framework for health in India is distributed across various constitutional provisions and judicial rulings. The directive principles mandate the state to improve nutrition, while the seventh schedule assigns public health to the states. Furthermore, the judiciary has linked health to the right to life, and the constitution empowers local bodies to manage community-level sanitation and health.

32. (B) Integration of mental health with general health services.
The National Mental Health Programme has evolved to focus on accessibility and the reduction of stigma. A primary strategy is the integration of mental healthcare into the general health delivery system, particularly through the District Mental Health Programme. This ensures that services are available at the community level rather than being confined to isolated and large psychiatric institutions.

33. (A) 4-1-2-3
India's systematic health planning began with early policy frameworks like the 2002 National Health Policy. This paved the way for the rural mission in 2005 and the subsequent urban mission in 2013. The evolution culminated in the launch of the Ayushman Bharat program, which integrated these previous efforts into a more comprehensive national health mission and insurance framework.

34. (A) The role of VHSNC in village health planning and monitoring.
Community participation is a cornerstone of the National Health Mission, emphasizing local involvement in decision-making. The Village Health Sanitation and Nutrition Committee serves as the primary platform where residents can actively participate in planning and monitoring health services. This decentralized approach ensures that healthcare initiatives are responsive to the specific needs and cultural contexts of the local population.

35. (C) Health and Wellness Centres — Screening for non-communicable diseases.
Ayushman Bharat is a two-pillar program designed to cover the entire spectrum of healthcare. The Health and Wellness Centres focus on comprehensive primary care, including the screening and management of non-communicable diseases. In contrast, the insurance component provides coverage for secondary and tertiary hospitalization, ensuring that the scheme addresses both preventive and curative health needs for beneficiaries.

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36. (C) 2013
The National Urban Health Mission was officially launched in twenty-thirteen to address the unique health challenges faced by the urban population. It specifically prioritizes the urban poor, including slum dwellers and other vulnerable groups living in cities. This mission was later integrated with its rural counterpart to form the unified National Health Mission for comprehensive national coverage.

37. (D) 1, 2, and 3
The National Health Policy of 2017 is designed to be highly inclusive, targeting various forms of health disparities. It addresses regional gaps between states, vertical inequalities between different income levels, and horizontal inequalities between social groups like different castes. By acknowledging these diverse dimensions, the policy aims to provide a framework for achieving more equitable health outcomes across the nation.

38. (B) Health outcomes improve at every higher level of social hierarchy.
The social gradient in health describes a continuous relationship where individuals with higher social and economic status enjoy better health than those below them. This is not just a difference between the extremes of wealth and poverty. Instead, it is a stepwise phenomenon where health status improves incrementally as one moves up the ladder of income, education, and occupation.

39. (D) Performance-linked incentives for institutional deliveries.
ASHAs do not receive a fixed salary but are compensated through performance-based incentives for specific tasks. Under the Janani Suraksha Yojana, their primary incentive is tied to successful institutional deliveries where they escort and support pregnant women. This model motivates community health workers to actively promote safe motherhood practices and ensure that women receive professional care during childbirth.

40. (A) Neglect of public infrastructure in favor of insurance.
A frequent critique of the Ayushman Bharat insurance model is its heavy reliance on purchasing care from the private sector. Critics argue that this focus may divert attention and resources away from the essential task of strengthening public health infrastructure. There is concern that an insurance-led approach might prioritize curative hospital services over long-term investments in government-run clinics and hospitals.

41. (C) JSSK
The Janani Shishu Suraksha Karyakram is specifically aimed at removing financial barriers to emergency care for mothers and infants. One of its hallmark benefits is the provision of free transport from home to the health facility and back. This ensures that lack of transportation or the cost of travel does not prevent families from seeking timely medical intervention during critical periods.

42. (A) Under-five mortality rates
Disparities in health outcomes between the wealthy and the poor are most starkly reflected in early childhood survival indicators. Children from the poorest households often face significantly higher risks of mortality before the age of five compared to those from the wealthiest families. This gap highlights the profound impact of socio-economic status on access to nutrition, sanitation, and life-saving healthcare.

43. (A) Both A and R are true and R is the correct explanation of A.
The current national health policy supports a trust-based model for implementing the large-scale health insurance program. This framework allows the government to function as a payer, ensuring that eligible poor families can access secondary and tertiary care at empanelled hospitals. By utilizing this model, the government aims to provide financial protection and reduce the burden of healthcare costs.

44. (B) Marginalized groups show higher mortality than the national average.
Caste-based health inequality remains a significant challenge in the Indian healthcare landscape. Statistics consistently show that individuals from marginalized communities experience higher mortality rates and poorer health indicators than the general population. These disparities are driven by a combination

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of economic disadvantage, social exclusion, and systemic barriers that limit their access to quality medical services and proper nutrition.

45. (C) There is a linear relationship between social status and health.
The concept of the social gradient suggests that health and social status are linked in a continuous, linear manner. It posits that at every level of the social hierarchy, individuals have better health outcomes than those immediately below them. This implies that health is not just about poverty, but about the unequal distribution of resources across all social strata.

46. (D) To achieve at least 85% cure rate of infectious cases.
The Revised National TB Control Programme was designed with specific, measurable targets to combat the disease effectively. A primary objective is to achieve and maintain a high cure rate, specifically eighty-five percent, among newly detected infectious cases. By focusing on successful treatment completion through directly observed therapy, the program aims to reduce transmission and improve patient outcomes nationwide.

47. (A) The overlap of multiple social disadvantages.
Intersectionality is a critical framework used to understand how various social identities, such as gender, caste, and class, interact to create complex patterns of discrimination. In health, it explains how a person belonging to multiple marginalized groups may face unique and compounded barriers that are not captured by looking at a single social factor in isolation from others.

48. (B) P-2, Q-1, R-4, S-3
Diverse barriers affect health access across different social and geographic categories. Tribal populations often suffer due to geographical isolation in remote areas, while gendered barriers include low female autonomy in healthcare decisions. Regional disparities are marked by a lack of advanced hospitals in backward districts, and class-based issues involve a lack of purchasing power for essential medicines.

49. (B) Screening for Hypertension and Diabetes.
Health and Wellness Centres are designed to provide comprehensive primary healthcare close to the community. A vital component of their service package is the early detection and management of chronic conditions. By conducting regular screenings for hypertension and diabetes, these centers play a crucial role in the prevention and management of non-communicable diseases, reducing the future burden on hospitals.

50. (A) Strengthening the VHSNC and ASHA.
Communitization in the National Health Mission refers to the process of giving communities more control and ownership over their health services. This is primarily achieved by empowering local volunteers and village committees to plan and monitor health initiatives. By involving community members directly, the mission ensures that healthcare is more accountable, culturally appropriate, and responsive to the actual local needs.

51. (A) Both A and R are true and R is the correct explanation of A.
Significant regional health disparities exist between states like Kerala and Bihar. These differences are largely attributed to historical patterns of investment in social sectors. Kerala's long-term focus on primary education and health infrastructure has created a robust system that produces superior health outcomes, whereas Bihar has faced challenges in developing similar levels of infrastructure and service delivery.

52. (C) Three installments
The Pradhan Mantri Matru Vandana Yojana provides a total cash incentive of five thousand rupees to pregnant women. This amount is disbursed in three distinct installments, each linked to specific health-related milestones such as early registration of pregnancy, antenatal check-ups, and the registration of the child's birth and first cycle of vaccinations. This ensures continuous engagement with health services.

53. (C) High out-of-pocket expenditure (OOPE)
Out-of-pocket expenditure is a negative indicator of health equity because it places a disproportionate financial burden on the poor. When patients must pay for services at the point of care, it can lead to financial catastrophe or the avoidance of necessary treatment. Reducing these

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healthcare services available in a state. Large differences in these rates between states signify deep-seated structural inequalities in the national healthcare landscape.

72. (B) Up to 1 year of age
Under the Janani Shishu Suraksha Karyakram, the entitlement to free treatment for children was expanded to cover the entire first year of life. This ensures that infants have access to cashless drugs, diagnostics, and transport for any illness they may face during this critical developmental period. This policy aims to reduce infant mortality and alleviate the financial burden on families.

73. (C) P-1, Q-2, R-3, S-4
Indian health policies address various needs through specific initiatives. The motherhood scheme promotes institutional births through cash incentives, while another program provides compensation for lost wages. National insurance covers expensive hospital treatments, and local village committees are responsible for creating community health plans. Together, these programs form a multi-layered safety net for the population's diverse health requirements.

74. (A) To ensure a unified approach to health system strengthening.
The merger of the rural and urban missions into the unified National Health Mission was intended to create a more cohesive and efficient healthcare strategy. This integration allows for better resource allocation and a standardized approach to strengthening health systems across all geographic areas. It ensures that the government can address the health needs of both rural and urban populations through a single, coordinated framework.

75. (A) Both A and R are true and R is the correct explanation of A.
There is a strong correlation between household wealth and health outcomes in India. Wealthier families generally enjoy better health because they have the financial resources to afford high-quality nutrition, clean living environments, and advanced medical care. These advantages provide a protective effect against disease and result in significantly better demographic indicators compared to those living in poverty.

76. (B) Monthly financial incentive of ₹500 for nutritional support.
The Nikshay Poshan Yojana is a direct benefit transfer scheme designed to support the nutritional needs of tuberculosis patients. It provides a monthly financial incentive to help patients afford the high-quality diet necessary for effective recovery and to maintain their strength during treatment. This financial assistance is a crucial component of the national strategy to improve tuberculosis cure rates.

77. (C) A younger person having better hearing than an elderly person.
Health inequality refers to any difference in health status, while inequity specifically concerns differences that are unjust and avoidable. Biological variations, such as age-related hearing loss, are natural inequalities but not necessarily inequities. In contrast, disparities caused by social discrimination or lack of infrastructure are considered inequities because they are unfair and can be addressed through social and policy interventions.

78. (C) Both statements are correct.
Universal Health Coverage is a primary goal of modern health policy, aiming to provide all citizens with access to necessary medical services. This concept emphasizes that quality care should be available to everyone without causing them financial hardship. By striving for this goal, the government seeks to ensure that health is a realized right for all, regardless of their economic status.

79. (A) 1 and 3 only
The social gradient demonstrates that health is not a binary but a continuous spectrum across all levels of society. It reveals that even individuals in the middle class often experience worse health outcomes than those at the very top of the social hierarchy. This implies that health improvement strategies should be broad-based and not just focused on the extremely poor.

80. (A) Both A and R are true and R is the correct explanation of A.
Tribal populations often suffer from poor health outcomes due to their geographical exclusion from the mainstream healthcare system. Many tribal habitations are located in remote and

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by 2020 and achieve a replacement level fertility rate of two point one across the country by the year 2025.

63. (A) Indian Space Research Organisation
The National Health Mission operates through a specialized administrative structure dedicated to health delivery. This includes district health societies for local management, Rogi Kalyan Samitis for hospital oversight, and village committees for community participation. Organizations focused on space research are not part of this health mission's framework, as their primary mandate lies in technological and scientific exploration rather than public health.

64. (A) Statement I is correct, Statement II is incorrect.
The social gradient is a universal phenomenon where health outcomes improve at every step up the social ladder. It is not limited to infectious diseases but is equally, if not more, pronounced in chronic conditions like cardiovascular disease and diabetes. These chronic illnesses are also heavily influenced by lifestyle, stress, and environmental factors linked to a person's socio-economic status.

65. (A) Both A and R are true and R is the correct explanation of A.
Janani Suraksha Yojana is classified as a demand-side intervention because it uses financial incentives to influence the behavior of the beneficiaries. By providing a cash payment to the mother upon delivering at a health facility, the scheme creates a direct demand for institutional care. This strategy aims to reduce maternal and neonatal mortality by ensuring births occur under professional supervision.

66. (A) Ensuring patients swallow TB medication in their presence.
A DOTS provider plays a critical role in the tuberculosis treatment protocol by supervising the administration of medicine. Their primary responsibility is to ensure that the patient actually swallows the prescribed drugs in their presence. This direct observation is essential to prevent treatment interruption, reduce the risk of drug resistance, and ensure that the patient achieves a full recovery.

67. (C) It is an explicit Fundamental Right in the 1950 Constitution.
When the Indian Constitution was adopted in 1950, health was not listed as an explicit fundamental right. Instead, it was included in the Directive Principles of State Policy as a guiding duty for the government. Over the decades, however, the judiciary has interpreted the right to life under Article twenty-one to encompass the right to health and medical care.

68. (A) 1 and 2 only
Ayushman Bharat PM-JAY is designed for maximum inclusivity by removing caps on family size and the age of its members. It provides comprehensive coverage that includes both pre-hospitalization and post-hospitalization costs. Crucially, the scheme is not limited to government facilities; it allows beneficiaries to access care at a wide network of both public and private empanelled hospitals.

69. (C) Awareness, prevention, and free ART treatment.
The National AIDS Control Programme focuses on a comprehensive public health approach to manage the HIV epidemic. Its primary strategies include large-scale awareness campaigns to reduce transmission and the provision of free antiretroviral therapy to those infected. By prioritizing prevention and accessible treatment, the program aims to improve the quality of life for patients and control the spread of the virus.

70. (A) Both A and R are true and R is the correct explanation of A.
The ASHA worker serves as a vital bridge between the rural community and the formal health system. Her effectiveness stems from being a resident of the same village, which builds trust and ensures she is always accessible to her neighbors. As a trained activist, she can provide basic care and guide villagers toward professional medical services when necessary.

71. (D) Infant Mortality Rate (IMR) differences between various states.
Regional health inequality is often assessed by comparing key health outcomes across different geographic areas. The infant mortality rate is a standard indicator used for this purpose, as it reflects the quality of nutrition, sanitation, and

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CHAPTER 08
Anthropology and Social Science

1. Which of the following best defines the term 'Anthropology' based on its etymological roots?
(A) The study of ancient civilizations and their monuments.
(B) The scientific study of humans, their biology, and culture.
(C) The systematic study of social institutions and modern states.
(D) The analysis of psychological patterns in individual behavior.

2. In the context of anthropology, what does the 'holistic approach' primarily signify?
(A) The study of all facets of human life as an integrated whole.
(B) The exclusive examination of human populations through a genetic lens.
(C) The isolated analysis of social institutions without historical context.
(D) The focused investigation of tribal groups ignoring global influences.

3. Identify the correct statement regarding Biological Anthropology.
(A) It focuses solely on the study of ancient architectural structures.
(B) It is concerned only with the linguistic variations of modern populations.
(C) It investigates human biological diversity, evolution, and genetics.
(D) It ignores the impact of environment on human physiological adaptation.

4. Given below are two statements, one is labelled as Assertion (A) and the other is labelled as Reason (R):
Assertion (A): Anthropology is considered a comparative discipline.
Reason (R): Anthropologists compare data from different populations and time periods to reach general understandings of the human condition.
(A) Both A and R are true and R is the correct explanation of A.
(B) Both A and R are true but R is not the correct explanation of A.
(C) A is true but R is false.
(D) A is false but R is true.

5. Which of the following statements about Archaeological Anthropology is INCORRECT?
(A) It reconstructs past lifeways by analyzing material remains.
(B) It helps in understanding the evolution of human culture over time.
(C) It relies heavily on written records as the primary source of data.
(D) It studies tools, pottery, and hearths to interpret ancient behavior.

6. Which of these is NOT a primary concern of Linguistic Anthropology?
(A) The investigation of how language reflects and reinforces social identities.
(B) The use of genetic markers to trace prehistoric migration routes.
(C) The analysis of how linguistic structures shape human cognitive perceptions.
(D) The systematic description of phonetic and grammatical patterns in languages.

7. Match List I with List II and select the correct answer using the codes given below:
List I: Branches of Anthropology
P. Physical Anthropology
Q. Social Anthropology
R. Archaeological Anthropology
S. Linguistic Anthropology
List II: Subject Matter
1. Material remains
2. Social institutions
3. Human evolution
4. Communication systems
(A) P-1, Q-4, R-3, S-2
(B) P-2, Q-3, R-4, S-1
(C) P-3, Q-2, R-1, S-4
(D) P-4, Q-1, R-2, S-3

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difficult terrains where building and maintaining health infrastructure is challenging. This physical isolation, combined with inadequate transport links, makes it difficult for these communities to access timely and essential medical services.

81. (B) They provide a package of 12 essential health services.
Health and Wellness Centres are designed to provide a comprehensive and expanded range of primary healthcare services at the community level. Their standardized service package includes twelve essential components, such as maternal and child health, communicable and non-communicable disease management, and basic emergency care. This model ensures that a wide variety of health needs are met close to where people live.

82. (A) Lack of accountability and unnecessary medical procedures.
A significant concern regarding the private healthcare sector is the potential for profit-driven practices that lack adequate public oversight. This can sometimes lead to patients being subjected to unnecessary diagnostic tests or medical procedures to increase revenue. The lack of a robust regulatory framework for costs and quality in the private sector remains a major challenge for achieving equitable healthcare.

83. (C) P-2, Q-4, R-1, S-3
Indian health initiatives use various strategies to address specific public health challenges. Some provide free medications to mothers, while others use technology like smart cards for insurance. Mental health care and HIV prevention are also handled through dedicated national programs. These diverse components work together to provide a comprehensive healthcare safety net that targets different populations and their unique medical needs.

84. (D) Local monitoring and planning for health and sanitation.
The Village Health Sanitation and Nutrition Committee is a community-level body tasked with decentralized health governance. Its primary role involves monitoring local health services, identifying gaps in sanitation, and planning village-specific health interventions. By involving local residents and leaders, the committee ensures that health and hygiene initiatives are better managed and tailored to the actual requirements of the village.

85. (A) Both A and R are true and R is the correct explanation of A.
Horizontal inequality refers to disparities between groups that may have similar economic levels but differ in other social characteristics. Caste-based health inequality is a prime example, as individuals from different castes may face different health outcomes even with similar incomes. This is due to social exclusion, differential treatment in healthcare settings, and the long-term effects of systemic social disadvantage.

86. (B) Cosmetic surgery for aesthetic purposes.
Ayushman Bharat PM-JAY focuses on providing life-saving and essential medical treatments for serious health conditions. It covers a wide range of secondary and tertiary procedures, including cardiology and oncology. However, the scheme excludes elective procedures that are not medically necessary, such as cosmetic surgeries performed solely for aesthetic reasons, as it prioritizes the most critical and catastrophic healthcare needs.

87. (D) Mental health services at the primary healthcare level.
The National Mental Health Programme has shifted its focus from centralized asylum-based care toward a more integrated community-based approach. It aims to provide mental health services at the primary healthcare level to ensure that diagnosis and treatment are accessible to all. By training general medical officers and health workers, the program seeks to normalize mental healthcare and reduce the associated social stigma.

88. (A) Continuous skill enhancement for maternal and child care.
ASHAs undergo regular and systematic training to ensure they have the necessary skills to support their communities. This capacity building is a continuous process that focuses on maternal health, newborn care, and disease prevention. By constantly updating their knowledge through various training modules, the health system

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ensures that these volunteers can provide high-quality guidance and basic care to local families.

89. (C) Both statements are correct.
The Janani Suraksha Yojana recognizes that states have varying levels of health infrastructure and service utilization. States with historically low rates of institutional delivery are categorized as Low Performing. To encourage safe motherhood in these areas, the scheme provides higher cash incentives to women and ASHAs, aiming to accelerate the transition from home births to births in health facilities.

90. (A) 1 and 3 only
Health inequity is fundamentally a matter of social justice, focusing on differences that are unfair and preventable. It is not about biological variations but about social determinants like poverty, education, and living conditions. Addressing inequity therefore requires comprehensive strategies that go beyond medical treatment to tackle the underlying social and economic factors that influence a person's overall health and well-being.

91. (D) P-3, Q-4, R-1, S-2
Key concepts in health systems define how services are delivered and funded. Out-of-pocket costs are paid directly by individuals, while universal coverage ensures no one is left behind. Comprehensive primary care is delivered through wellness centers, and targeted interventions are used for high-risk groups in disease control. Together, these elements form a strategic framework for managing a nation's public health.

92. (B) It provides ₹5,000 for the first living child.
The Pradhan Mantri Matru Vandana Yojana is a maternity benefit scheme that provides partial wage compensation to pregnant women. It specifically offers a cash incentive of five thousand rupees for the birth of the first living child. This benefit is intended to encourage proper health-seeking behavior during pregnancy and to provide financial support for the mother's nutritional needs and well-being.

93. (A) 2-4-1-3
The Indian public health system follows a tiered referral hierarchy to ensure efficient care delivery. It begins at the grassroots level with sub-centers and wellness centers, which refer patients to primary health centers. Further specialized care is provided at community health centers, while the most advanced medical and surgical services are typically found at the district hospital level.

94. (D) Counseling mothers on breastfeeding and immunization.
An ASHA's role is centered on community mobilization and health education. One of her key competency-based tasks is providing essential counseling to mothers regarding infant nutrition and the importance of timely vaccinations. While she is not trained for medical procedures like surgery or complex prescribing, her ability to influence family health practices makes her a vital part of the public health system.

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95. (A) Both A and R are true and R is the correct explanation of A.
The current national health policy recognizes digital technology as a powerful tool for improving healthcare delivery. By implementing digital health systems, the government can better track patient outcomes and manage health data more effectively. This technological integration helps identify and address regional disparities, ensuring that healthcare services are more responsive and equitably distributed across the entire country.

96. (B) PM-JAY — Primary Health only
Ayushman Bharat PM-JAY is specifically designed to provide coverage for secondary and tertiary care hospitalization. It is not limited to primary health, which is instead handled by the Health and Wellness Centres. Other programs like those for tuberculosis, HIV, and mental health are correctly associated with their respective focus areas in the national health framework.

97. (B) Incremental status gains lead to better health outcomes.
The social gradient illustrates that health is influenced by a continuous hierarchy of social status. It suggests that individuals at every level of the social scale enjoy slightly better health than those immediately below them. This linear relationship means that even small improvements in a person's socio-economic position can lead

to incrementally better health outcomes and a longer life expectancy.

98. (A) Low enrollment and limited impact on reducing out-of-pocket costs.
The older national health insurance scheme for the poor faced significant criticism before being replaced. Major issues included low levels of awareness and enrollment among the target population. Furthermore, studies often found that the scheme had a limited effect on reducing the overall out-of-pocket medical expenses for its beneficiaries, highlighting the need for a more comprehensive and better-managed program.

99. (C) Both statements are correct.
Community participation is essential for ensuring that health interventions are culturally appropriate and widely accepted by the local population. The Village Health Sanitation and Nutrition Committee serves as the primary mechanism for this involvement within the National Health Mission. By giving local residents a platform to plan and monitor their own services, the system becomes more accountable and effective.

100. (D) To promote institutional delivery among poor pregnant women.
The Janani Suraksha Yojana was specifically launched to reduce maternal and neonatal mortality by encouraging women to give birth in health facilities. It provides a cash incentive to poor pregnant women who choose institutional delivery over home birth. This strategy ensures that childbirth is attended by professional healthcare providers, significantly improving the chances of survival for both the mother and her child.

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costs is a primary goal of public health policies aimed at achieving universal health coverage.

54. (C) Both (A) and (B)
The legal basis for the right to health in India is multifaceted. While the Directive Principles of State Policy mandate the government to improve public health and nutrition, the judiciary has also elevated health to a fundamental right. By interpreting the right to life to include health, the courts have created a constitutional obligation for the state to provide care.

55. (D) Based on the Socio-Economic Caste Census (SECC) 2011 data.
To ensure that benefits reach the most deserving, Ayushman Bharat PM-JAY uses objective criteria for beneficiary identification. It relies on the results of the twenty-eleven Socio-Economic Caste Census, which categorized households based on various deprivation markers. This data-driven approach allows the scheme to target the bottom forty percent of the population without requiring a lengthy and complex application process.

56. (A) 1 and 2 only
The National Health Policy of 2017 promotes a holistic shift from treating illnesses to fostering overall wellness. It sets specific public health targets, such as significantly reducing tobacco consumption to improve long-term outcomes. Furthermore, the policy emphasizes a cooperative federalist approach where the central and state governments work together, rather than a centralized system that excludes the role of states.

57. (C) VHSNC — District level
The Village Health Sanitation and Nutrition Committee is designed to function at the grassroots level, specifically within each village. Its role is to facilitate community participation and local health planning. In contrast, health volunteers operate at the village level, nursing midwives at sub-centers, and medical officers at primary health centers, all forming a structured hierarchy for public health delivery.

58. (A) Elimination of out-of-pocket expenses for target groups.
The primary goal of the Janani Shishu Suraksha Karyakram is to ensure that no pregnant woman or sick infant faces financial hardship when seeking care at public health institutions. It provides a legal entitlement to free drugs, diagnostics, and transport. This initiative specifically targets the elimination of all out-of-pocket expenses, making institutional healthcare truly accessible for the most vulnerable populations.

59. (D) A is false but R is true.
Medical pluralism refers to the coexistence of different medical systems like Ayurveda and Allopathy, rather than a critique of the private sector's dominance. While the private sector provides a significant portion of healthcare in India, it is often criticized for being poorly regulated and expensive. However, this does not mean the term medical pluralism is used as a critique of private healthcare.

60. (D) National Health Policy — 2021
The timelines for major Indian health initiatives are well-documented. The rural mission started in 2005, the first national health insurance for the poor in 2008, and the comprehensive Ayushman Bharat in 2018. However, there is no major National Health Policy from the year twenty-twenty-one; the most recent and significant policy was established in twenty-seventeen to guide future health strategies.

61. (C) Neglect of female health needs due to patriarchal social norms.
Gender-based health inequality in India is deeply rooted in social and cultural factors. Patriarchal norms often lead to the prioritization of male health and nutrition over females within the family. This systemic neglect results in higher rates of malnutrition and untreated illnesses among women and girls, reflecting broader societal inequities that transcend simple biological differences between the two genders.

62. (B) P-2, Q-3, R-4, S-1
The National Health Policy of 2017 established several time-bound targets for disease elimination and maternal health. It aimed to eliminate leprosy by 2018 and kala-azar by 2017. Furthermore, it set a goal to reduce the maternal mortality ratio

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8. Read the following statements and select the correct option:
Statement I: Anthropology traditionally focused on small-scale, non-literate societies.
Statement II: Sociology has traditionally focused on large-scale, industrialized western societies.
(A) Statement I is correct, but Statement II is incorrect.
(B) Statement II is correct, but Statement I is incorrect.
(C) Both Statement I and Statement II are correct.
(D) Neither Statement I nor Statement II is correct.

9. When an anthropologist studies the relationship between cultural practices and the physical environment, which interdisciplinary link is being explored?
(A) Anthropology and Political Science
(B) Anthropology and Economics
(C) Anthropology and Geography
(D) Anthropology and Psychology

10. Consider the following statements regarding the 'Emic' approach:
1. It focuses on the perspective of the cultural insider.
2. It uses categories and concepts defined by the researcher.
3. It aims to understand how local people think and perceive the world.
Which of the statements given above are correct?
(A) 1 and 2 only
(B) 2 and 3 only
(C) 1 and 3 only
(D) 1, 2, and 3

11. Which field of study is most concerned with the application of anthropological data to solve contemporary social problems?
(A) Pure Anthropology
(B) Historical Anthropology
(C) Theoretical Anthropology
(D) Applied Anthropology

12. Which of the following pairs is correctly matched?
(A) Ethnography – Statistical analysis of global demographics
(B) Participant Observation – Immersive fieldwork method
(C) Ethnocentrism – Viewing cultures from an objective lens
(D) Cultural Relativism – Ranking cultures from primitive to civilized

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13. Given below are two statements, one is labelled as Assertion (A) and the other is labelled as Reason (R):
Assertion (A): Medical Anthropology is an interdisciplinary field that bridges social and biological sciences.
Reason (R): It examines how health and illness are shaped, experienced, and understood across different cultures.
(A) Both A and R are true and R is the correct explanation of A.
(B) Both A and R are true but R is not the correct explanation of A.
(C) A is true but R is false.
(D) A is false but R is true.

14. Identify the INCORRECT pair regarding the relationship of Anthropology with other disciplines.
(A) Anthropology and Biology – The multidisciplinary study of human biological evolution.
(B) Anthropology and History – The utilization of oral histories to reconstruct the past.
(C) Anthropology and Psychology – The investigation of national character and personality.
(D) Anthropology and Economics – Focus on global market exchange systems.

15. What is the primary definition of 'Ethnocentrism'?
(A) Judging other cultures by the standards and values of one's own culture.
(B) Maintaining the position that all cultures possess equal inherent value.
(C) Learning the norms and expectations of a society during the formative years.
(D) Conducting systematic research on diverse ethnic groups living in modern cities.

16. Arrange the following stages of anthropological research in the typical chronological order:
1. Selecting a research problem
2. Conducting fieldwork

3. Data analysis and interpretation
4. Writing the ethnography

(A) 1-2-3-4
(B) 2-1-3-4
(C) 1-3-2-4
(D) 4-3-2-1

17. Forensic anthropology is a sub-specialization of which major branch?
(A) Cultural Anthropology
(B) Physical Anthropology
(C) Linguistic Anthropology
(D) Archaeological Anthropology

18. Which statement best describes the relationship between Anthropology and Sociology?
(A) Disciplines that share social interests but use different scales and methods.
(B) Fields that are entirely identical in their core methodology and subject matter.
(C) Theoretical frameworks where sociology is viewed as a minor sub-branch of study.
(D) Studies focusing on the distant past versus those focusing on future projections.

19. Match List I with List II and select the correct answer using the codes given below:
List I: Concept
P. Cultural Relativism
Q. Ethnocentrism
R. Emic
S. Etic
List II: Description
1. Judging others by one's own standards
2. Understanding a culture on its own terms
3. Outsider's perspective
4. Insider's perspective

(A) P-1, Q-2, R-3, S-4
(B) P-2, Q-1, R-4, S-3
(C) P-3, Q-4, R-1, S-2
(D) P-4, Q-3, R-2, S-1

20. Which of the following is an INCORRECT statement about 'Cultural Relativism'?
(A) It was championed by Franz Boas to counter evolutionary racism.
(B) It suggests that there are no universal moral standards to judge cultures.
(C) It encourages the researcher to remain neutral during data collection.
(D) It argues that some cultures are inherently more developed than others.

21. If an anthropologist is studying the redistribution of wealth in a tribal 'Potlatch' ceremony, they are most likely engaging with:
(A) Political Anthropology
(B) Forensic Anthropology
(C) Economic Anthropology
(D) Linguistic Anthropology

22. Consider the following statements about Participant Observation:
1. It involves the researcher living among the people being studied.
2. It requires the researcher to remain completely detached and invisible.
3. It helps in capturing both verbal and non-verbal behavior in a natural setting.

Which of the statements given above are correct?
(A) 1 and 2 only
(B) 2 and 3 only
(C) 1 and 3 only
(D) 1, 2, and 3

23. Read the following statements and select the correct option:
Statement I: Globalization has altered the traditional focus on isolated societies in anthropology.
Statement II: Modern anthropology now includes the study of global flows, migration, and digital media.
(A) Statement I is correct, but Statement II is incorrect.
(B) Statement II is correct, but Statement I is incorrect.
(C) Both Statement I and Statement II are correct.
(D) Neither Statement I nor Statement II is correct.

24. Given below are two statements, one is labelled as Assertion (A) and the other is labelled as Reason (R):
Assertion (A): Anthropology played a role in the colonial administration of India.
Reason (R): Colonial officers used anthropological data to understand and control local populations through classifications like tribes and castes.
(A) Both A and R are true and R is the correct

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explanation of A.
(B) Both A and R are true but R is not the correct explanation of A.
(C) A is true but R is false.
(D) A is false but R is true.

25. Which of the following is the most appropriate definition of 'Ethnography'?
(A) A cross-cultural theoretical comparison involving multiple global societies.
(B) The scientific investigation of prehistoric human skeletal and fossil remains.
(C) A descriptive, fieldwork-based account of a specific human culture.
(D) The quantitative analysis of regional census data and demographic statistics.

26. Anthropology's relevance in social sciences is justified by which of the following?
(A) Its ability to provide a cross-cultural perspective on human behavior.
(B) Its focus on only the biological aspects of humanity.
(C) Its rejection of scientific methods in favor of storytelling.
(D) Its concentration on European history to the exclusion of others.

27. Match List I with List II and select the correct answer using the codes given below:
List I: Subject
P. Psychology
Q. Political Science
R. History
S. Biology
List II: Relationship with Anthropology
1. Power and leadership in stateless societies
2. Past events and cultural change
3. Culture and personality studies
4. Genetic variation and heredity
(A) P-1, Q-2, R-3, S-4
(B) P-2, Q-4, R-3, S-1
(C) P-3, Q-1, R-2, S-4
(D) P-4, Q-3, R-1, S-2

28. Which of the following statements regarding the 'Etic' approach is INCORRECT?
(A) It emphasizes the categories used by the scientific community.
(B) It prioritizes the subjective meanings assigned by the local people.
(C) It seeks to find universal laws or patterns of behavior.
(D) It allows for cross-cultural comparison using standardized criteria.

29. What is the main focus of Applied Anthropology in the context of development?
(A) Providing systematic critiques of all forms of contemporary modern technology.
(B) Encouraging the rapid assimilation of tribal groups into urban environments.
(C) Ensuring development projects are culturally sensitive and sustainable.
(D) Analyzing prehistoric stone tools to enhance modern agricultural productivity.

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30. Consider the following characteristics of Anthropology:
1. It uses a comparative method.
2. It is strictly limited to the study of the physical body.
3. It employs long-term fieldwork.
Which of the statements given above are correct?
(A) 1 and 2 only
(B) 2 and 3 only
(C) 1 and 3 only
(D) 1, 2, and 3

31. Which of the following is an EXCEPTION to the traditional methods used in Social Anthropology?
(A) Large-scale, controlled laboratory experiments on human groups.
(B) Conducting in-depth interviews with knowledgeable key informants.
(C) Engaging in long-term immersive participant observation in the field.
(D) Utilizing the genealogical method to trace complex kinship relations.

32. If a researcher is analyzing how the concept of 'authority' differs between a tribal chief and a modern prime minister, they are bridging Anthropology with:
(A) Economic Systems
(B) Political Science
(C) Human Geography
(D) Human Biology

(C) 1 and 3 only
(D) 1, 2, and 3

51. What is the core difference between Social Anthropology and Sociology in terms of 'Methodology'?
(A) Using participant observation in sociology while anthropology uses surveys.
(B) Investigating individuals in anthropology versus studying groups in sociology.
(C) Emphasizing immersive fieldwork versus extensive survey techniques.
(D) Asserting that there is no meaningful methodological difference between them.

52. Which of the following statements correctly describes the relationship between globalization and anthropology?
(A) Globalization has made the study of culture irrelevant.
(B) Globalization only affects economics, not cultural identity.
(C) Anthropology focuses only on isolated tribes that have no contact with globalization.
(D) Anthropologists now study how global forces are localized in specific communities.

53. Which branch of anthropology is concerned with the study of human speech and the various ways in which people communicate?
(A) Social Anthropology
(B) Biological Anthropology
(C) Linguistic Anthropology
(D) Archaeological Anthropology

54. The study of 'Human Genetics' falls under which branch of Anthropology?
(A) Cultural
(B) Biological
(C) Linguistic
(D) Archaeological

55. Which of the following best describes the 'Comparative Method' in anthropology?
(A) Limiting research to the comparison of humans with other animal species.
(B) Evaluating modern technological advances against ancient stone tool kits.
(C) Measuring physical traits among members of a single nuclear family group.
(D) Comparing cultures to identify universal and unique human behaviors.

56. Which of the following is an INCORRECT interpretation of Cultural Relativism?
(A) Obligating anthropologists to support harmful or violent practices.
(B) Encouraging a deeper understanding of the world's cultural diversity.
(C) Maintaining an open and unbiased mind during the research process.
(D) Serving as a critical tool to help researchers avoid ethnocentrism.

57. The relationship between Anthropology and Economics is seen in the study of:
(A) The exclusive study of formal mathematical economic theories.
(B) The analysis of stock market trends in major financial centers.
(C) The cultural context of economic production and distribution.
(D) The biological evolution and genetic development of currency.

58. Read the following statements and select the correct option:
Statement I: Anthropology is a science.
Statement II: Anthropology is a humanity.
(A) Statement I is correct, but Statement II is incorrect.
(B) Statement II is correct, but Statement I is incorrect.
(C) Both Statement I and Statement II are correct.
(D) Neither Statement I nor Statement II is correct.

59. Which concept refers to the 'insider's' view of their own culture?
(A) Etic
(B) Ethnocentric
(C) Exotic
(D) Emic

60. Anthropological studies of 'Castes' in India are an example of:
(A) Physical Anthropology
(B) Social Anthropology
(C) Linguistic Anthropology
(D) Archaeological Anthropology

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42. Consider the following statements about 'Applied Anthropology':
1. It uses anthropological theories to solve practical problems.
2. It is often employed in fields like public health and education.
3. It is purely an academic exercise with no real-world utility.

Which of the statements given above are correct?
(A) 1 and 2 only
(B) 2 and 3 only
(C) 1 and 3 only
(D) 1, 2, and 3

43. Read the following statements and select the correct option:
Statement I: Ethnocentrism is a universal human tendency.
Statement II: Cultural relativism is a methodological tool used by anthropologists to overcome ethnocentrism.
(A) Statement I is correct, but Statement II is incorrect.
(B) Statement II is correct, but Statement I is incorrect.
(C) Both Statement I and Statement II are correct.
(D) Neither Statement I nor Statement II is correct.

44. Given below are two statements, one is labelled as Assertion (A) and the other is labelled as Reason (R):
Assertion (A): Anthropology and Sociology are often called 'twin sisters'.
Reason (R): Both disciplines study human society and social behavior, though their traditional areas of focus differed.
(A) Both A and R are true and R is the correct explanation of A.
(B) Both A and R are true but R is not the correct explanation of A.
(C) A is true but R is false.
(D) A is false but R is true.

45. Which application of Anthropology is most useful in identifying victims of natural disasters?
(A) Cultural Anthropology
(B) Linguistic Anthropology
(C) Forensic Anthropology
(D) Economic Anthropology

46. Which of the following pairs is INCORRECTLY matched?
(A) Holistic – Whole/Integrated
(B) Etic – Observer's view
(C) Relativism – No judgment
(D) Emic – Scientist's view

47. Match List I with List II and select the correct answer using the codes given below:
List I: Concept
P. Participant Observation
Q. Cultural Relativism
R. Holistic Approach
S. Forensic Anthropology
List II: Scholar/Focus
1. B. Malinowski
2. Franz Boas
3. All-encompassing study
4. Skeletal identification
(A) P-1, Q-2, R-3, S-4
(B) P-2, Q-1, R-4, S-3
(C) P-3, Q-4, R-1, S-2
(D) P-4, Q-3, R-2, S-1

48. Which of the following is NOT a characteristic of the Anthropological perspective?
(A) Utilizing comparative analysis across different human cultures.
(B) Reliance on strictly quantitative, survey-only methodologies.
(C) Placing a strong professional emphasis on long-term fieldwork.
(D) Adopting a holistic perspective to understand human societies.

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49. 'Ethnohistory' is a specialized field that combines the methods of:
(A) Anthropology and Biology
(B) Anthropology and History
(C) Anthropology and Geography
(D) Anthropology and Economics

50. Consider the following regarding the 'Colonial History' of Anthropology:
1. It provided data for colonial governance.
2. It helped in the 'civilizing mission' ideology.
3. It was entirely independent of political interests.

Which of the statements given above are correct?
(A) 1 and 2 only
(B) 2 and 3 only

93. What is 'Paleoanthropology'?
(A) Investigating variations in modern human skin pigmentation.
(B) Analyzing the rhythmic structures of ancient poetic works.
(C) Studying human evolution through fossilized remains.
(D) Researching the psychological development of human children.

94. Which of the following is a correct statement regarding the relationship between Anthropology and Political Science?
(A) Limiting research to the study of modern democratic states.
(B) Maintaining that these fields share no relevant research goals.
(C) Focusing strictly on the formal legal codes of modern nations.
(D) Studying political systems in diverse human societies.

95. In India, 'Tribal Studies' were initially started by:
(A) British colonial officials and later Indian academics.
(B) Professional information technology consultants in India.
(C) Independent journalists reporting on rural social issues.
(D) Urban economists focused exclusively on metropolitan centers.

96. Which of the following is an INCORRECT statement about the holistic approach?
(A) It means looking at the 'big picture'.
(B) It requires anthropologists to ignore biological data.
(C) It integrates social, cultural, and biological information.
(D) It helps in understanding the complexity of human life.

97. 'Cultural Relativism' suggests that:
(A) Some cultures are more 'evolved' than others.
(B) Every culture should be understood in its own context.
(C) Anthropologists should change the cultures they study.
(D) All cultures will eventually become the same.

98. Anthropology is derived from which language?
(A) Greek
(B) Latin
(C) Sanskrit
(D) French

99. The relationship between Anthropology and History is often described as:
(A) Competitive
(B) Antagonistic
(C) Complementary
(D) Irrelevant

100. Which of the following best summarizes the relevance of Anthropology today?
(A) Serving only as a tool for the study of the prehistoric past.
(B) Becoming redundant due to the rise of global internet access.
(C) Being applicable only within the context of rural Indian life.
(D) Providing insights into diversity and global challenges.

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61. Which of the following is the most appropriate definition of 'Culture' in Anthropology?
(A) Displaying refined manners and extensive knowledge of the arts.
(B) The biological traits inherited genetically from one's parents.
(C) A group's shared way of life, including beliefs and behaviors.
(D) The complex political system of a highly developed nation-state.

62. The use of 'Skeletal remains' to determine the age and sex of a person is a task for:
(A) Cultural Anthropologist
(B) Linguistic Anthropologist
(C) Economic Anthropologist
(D) Forensic Anthropologist

63. Which of the following statements about 'Fieldwork' is correct?
(A) It involves firsthand collection of data in a natural setting.
(B) It is usually done in a library.
(C) It is a recent addition to anthropology, starting in the 1990s.
(D) It excludes the study of modern urban settings.

64. The 'holistic' nature of Anthropology is best reflected when:
(A) Examining the religious beliefs of a specific tribal community.
(B) Studying the links between a group's environment and culture.
(C) Investigating the linguistic structures of a remote population.
(D) Analyzing the skeletal features of a prehistoric human group.

65. Which of the following pairs is INCORRECTLY matched?
(A) Economics – Reciprocity and Gift-giving
(B) Political Science – State-level politics only
(C) Psychology – Personality and Culture
(D) Geography – Cultural Ecology

66. What is the focus of 'Archaeological Anthropology'?
(A) Studying past human behavior through material remains.
(B) Observing living cultures in their current social settings.
(C) Investigating modern languages and their grammar rules.
(D) Researching the distribution of modern human blood groups.

67. Who is often called the 'Father of Indian Anthropology'?
(A) M.N. Srinivas
(B) L.P. Vidyarthi
(C) S.C. Roy
(D) D.N. Majumdar

68. The study of how different cultures perceive 'Mental Health' is a bridge between:
(A) Anthropology and Geography
(B) Anthropology and Economics
(C) Anthropology and History
(D) Anthropology and Psychology

69. Which of the following is NOT an 'Applied' use of anthropology?
(A) Designing culturally sensitive health programs.
(B) Improving communication between governments and indigenous groups.
(C) Purely theoretical debate about the origin of the universe.
(D) Assisting in rural development projects.

70. Which of the following statements regarding 'Ethnocentrism' is correct?
(A) It is consistently beneficial for diplomatic relations.
(B) It often leads to the misunderstanding of other cultures.
(C) It assists researchers in remaining completely objective.
(D) It is a mindset only identified in Western-style societies.

71. When an anthropologist looks at how 'Power' is exercised in a society without a formal government, they are studying:
(A) Economic Anthropology
(B) Biological Anthropology
(C) Linguistic Anthropology
(D) Political Anthropology

72. Which of the following is an INCORRECT statement about 'Ethnography'?

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33. Given below are two statements, one is labelled as Assertion (A) and the other is labelled as Reason (R):
Assertion (A): Ethnocentrism can lead to prejudice and discrimination.
Reason (R): It involves the assumption that one's own way of life is the only correct one.
(A) Both A and R are true and R is the correct explanation of A.
(B) Both A and R are true but R is not the correct explanation of A.
(C) A is true but R is false.
(D) A is false but R is true.

34. Which of the following correctly identifies the focus of 'Tribal Studies' in Indian Anthropology?
(A) Examining the social, economic, and cultural life of Scheduled Tribes.
(B) Studying only the urban migration of youth.
(C) Focusing exclusively on the genetic mapping of North Indian populations.
(D) Analyzing the history of the Mughal Empire.

35. Which pair is INCORRECTLY matched in the context of Anthropological branches?
(A) Physical Anthropology – Primatology
(B) Social Anthropology – Kinship studies
(C) Linguistic Anthropology – Excavation of burials
(D) Archaeological Anthropology – Prehistoric tools

36. Arrange the following in the order of their development/appearance in the history of Anthropological thought:
1. Armchair Anthropology (relying on others' accounts)
2. Professional Fieldwork (immersive stay)
3. Applied Anthropology (solving real-world problems)
(A) 1-2-3
(B) 2-1-3
(C) 3-2-1
(D) 1-3-2

37. The 'Culture and Personality' school primarily explores the relationship between Anthropology and:
(A) Political Science
(B) Economics
(C) Psychology
(D) Geography

38. Which of the following statements best describes the scope of Anthropology?
(A) It is restricted to the study of extinct species.
(B) It covers the entire human experience across time and space.
(C) It is only concerned with the social behavior of non-human primates.
(D) It deals exclusively with the linguistic patterns of European nations.

39. Match List I with List II and select the correct answer using the codes given below:
List I: Topic
P. Human growth and development
Q. Ancient pottery styles
R. Dialects and social status
S. Marriage and family patterns
List II: Sub-field
1. Archaeological Anthropology
2. Biological Anthropology
3. Social Anthropology
4. Linguistic Anthropology
(A) P-1, Q-2, R-3, S-4
(B) P-2, Q-1, R-4, S-3
(C) P-3, Q-4, R-1, S-2
(D) P-4, Q-3, R-2, S-1

40. Identify the correct statement regarding the relationship between Anthropology and History.
(A) Using oral traditions to study peoples historically ignored by formal records.
(B) Relying exclusively on archival research while history emphasizes field data.
(C) Promoting the idea that culture plays no significant role in shaping events.
(D) Maintaining that these two disciplines share no common theoretical grounds.

41. What is the primary objective of 'Medical Anthropology'?
(A) Providing specialized clinical training for anthropologists to perform surgery.
(B) Distributing pharmaceuticals to remote areas without conducting prior research.
(C) Studying cultural and biological factors impacting health and illness.
(D) Validating the claim that traditional medicine is superior to modern treatments.

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(A) It is sometimes called 'the fifth branch' of anthropology.
(B) It focuses on practical applications of research.
(C) It is strictly forbidden from working with NGOs.
(D) It can include 'Development Anthropology'.

84. The 'Culture and Personality' school was heavily influenced by:
(A) Newtonian Physics
(B) Darwinian Biology
(C) Marxist Economics
(D) Freudian Psychology

85. Which of the following best describes the 'Emic' approach?
(A) Utilizing the researcher's own categories to explain behavior.
(B) Disregarding the perspective of the native cultural members.
(C) Focusing on meanings within the society being studied.
(D) Applying research methods solely to Biological Anthropology.

86. Given below are two statements, one is labelled as Assertion (A) and the other is labelled as Reason (R):
Assertion (A): Anthropology is a comparative science.
Reason (R): It seeks to find patterns of human behavior by looking at many different societies.
(A) Both A and R are true and R is the correct explanation of A.
(B) Both A and R are true but R is not the correct explanation of A.
(C) A is true but R is false.
(D) A is false but R is true.

87. Which of the following is a correct statement regarding Linguistic Anthropology?
(A) It only studies the written alphabet of a language.
(B) It is the same as the study of literature.
(C) It does not care about the history of languages.
(D) It studies how language influences social life.

88. 'Participant Observation' was famously pioneered by:
(A) Bronislaw Malinowski
(B) Auguste Comte
(C) Adam Smith
(D) Charles Darwin

89. Identify the INCORRECT pair from the following:
(A) Holism – Multi-dimensional study
(B) Fieldwork – Data collection in the field
(C) Ethnocentrism – Objective study of others
(D) Tribal Studies – Focus on indigenous groups

90. Read the following statements and select the correct option:
Statement I: Anthropologists study the evolution of the human brain.
Statement II: Anthropologists study how the brain's capacity allows for the creation of culture.
(A) Statement I is correct, but Statement II is incorrect.
(B) Statement II is correct, but Statement I is incorrect.
(C) Both Statement I and Statement II are correct.
(D) Neither Statement I nor Statement II is correct.

91. Anthropology does NOT typically study:
(A) The social dynamics of contemporary urban metropolitan cities.
(B) The prehistoric biological evolution of human ancestors.
(C) The structural patterns and phonetic rules of human languages.
(D) The tectonic shifts of the Earth's lithospheric plates.

92. The study of 'Ethnocentrism' is important because it helps researchers:
(A) To become more biased toward one's own societal standards.
(B) To recognize and mitigate personal cultural prejudices.
(C) To demonstrate that one's own culture is objectively superior.
(D) To avoid the necessity of learning foreign tribal languages.

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(A) It is based on secondary data found in newspapers.
(B) It is the process of writing about a culture.
(C) It requires the researcher to participate in daily activities.
(D) It provides a 'thick description' of social life.

73. The study of 'Primates' is part of which branch?
(A) Social Anthropology
(B) Archaeological Anthropology
(C) Physical Anthropology
(D) Linguistic Anthropology

74. Which of the following is the most appropriate definition of 'Cultural Relativism'?
(A) Judging a culture by its own standards instead of another's.
(B) Believing that one's own culture is superior to all others.
(C) Modifying one's cultural practices to mimic another group.
(D) Compelling other societies to adopt one's own cultural norms.

75. Read the following statements and select the correct option:
Statement I: Anthropology and Geography both study the relationship between humans and their environment.
Statement II: Anthropology focuses more on the cultural adaptations to the environment.
(A) Statement I is correct, but Statement II is incorrect.
(B) Statement II is correct, but Statement I is incorrect.
(C) Both Statement I and Statement II are correct.
(D) Neither Statement I nor Statement II is correct.

76. The word 'Anthropos' means:
(A) Animal
(B) Human
(C) Society
(D) History

77. Which of the following is an INCORRECT pair?
(A) Social Anthropology – The study of kinship and social organization.
(B) Biological Anthropology – The investigation of human fossil remains.
(C) Archaeological Anthropology – Contemporary spoken languages.
(D) Applied Anthropology – Assisting in the process of policy formation.

78. Which approach is being used when a researcher says, 'The people in this village believe that illness is caused by spirits'?
(A) Etic
(B) Biological
(C) Archaeological
(D) Emic

79. Which of the following is a negative aspect associated with the 'Colonial' phase of anthropology?
(A) It often served the interests of the ruling empire.
(B) It led to the development of systematic fieldwork.
(C) It collected vast amounts of data.
(D) It established anthropology as a university discipline.

80. In the study of 'Globalization', anthropologists focus on:
(A) The exclusive study of international monetary transactions.
(B) The localization of global products and ideological concepts.
(C) Promoting the creation of a singular, unified global culture.
(D) Deliberately ignoring the social impact of modern technologies.

81. Which branch of anthropology would study 'ancient cave paintings'?
(A) Physical
(B) Archaeological
(C) Social
(D) Linguistic

82. The 'Genealogical Method' is primarily used to study:
(A) Kinship and descent
(B) Language patterns
(C) Fossil ages
(D) Soil types

83. Which of the following statements about 'Applied Anthropology' is INCORRECT?

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ANSWERS

1. (B) The scientific study of humans, their biology, and culture
   Rooted in Greek words, this discipline is the comprehensive study of humankind across time and space. It bridges the gap between the biological sciences and social sciences by investigating physical evolution alongside cultural development. This dual focus allows for a deeper understanding of human diversity and the shared characteristics that define the species globally.

2. (A) The study of all facets of human life as an integrated whole
   The holistic perspective emphasizes the interconnectedness of various aspects of human existence, including biology, history, language, and culture. Rather than studying these components in isolation, anthropologists analyze how they influence one another to form a complete picture of society. This comprehensive method ensures that no single factor is viewed as the sole determinant of human behavior.

3. (C) It investigates human biological diversity, evolution, and genetics
   This subfield focuses on the physical aspects of the human species, exploring genetic variation, primate behavior, and the fossil record. By examining how humans adapt to diverse environments over millennia, it provides insights into evolutionary processes. Research in this area often overlaps with biology and medicine to understand health, growth, and the biological foundations of human diversity.

4. (A) Both A and R are true and R is the correct explanation of A
   Comparison is fundamental to anthropological research as it allows for the identification of universal human patterns and unique cultural variations. By evaluating data from diverse populations across different geographical regions and historical periods, researchers can test theories about social behavior. This systematic cross-cultural analysis helps in developing a broad and objective understanding of the complexities of the human condition.

5. (C) It relies heavily on written records as the primary source of data
   While written records are vital for historical periods, archaeology primarily relies on the analysis of material remains like tools, pottery, and ruins to reconstruct past lifestyles. This branch is essential for understanding prehistoric societies that existed before the invention of writing. By interpreting physical artifacts and environmental data, archaeologists piece together the development and evolution of human cultures.

6. (B) The use of genetic markers to trace prehistoric migration routes
   Linguistic anthropology examines how language shapes social communication, cultural identity, and human cognition. It investigates the relationship between speech patterns and social structures rather than biological markers. Tracing prehistoric migrations through genetic markers belongs to biological anthropology, whereas this subfield focuses on the role of language as a cultural tool that reflects and influences the way people perceive reality.

7. (C) P-3, Q-2, R-1, S-4
   Physical anthropology examines human evolution, while social anthropology focuses on social institutions like marriage and kinship. Archaeological anthropology reconstructs past lives through material remains, and linguistic anthropology analyzes communication systems and their social impact. Mapping these branches to their respective subject matters highlights the diverse and specialized nature of anthropological inquiry in understanding the various facets of humanity.

8. (C) Both Statement I and Statement II are correct
   Historically, anthropology and sociology developed distinct focuses, with anthropologists studying small-scale, non-literate societies and sociologists examining large-scale, industrialized

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social issues in fields like education and public health. It is far from a purely academic exercise; it provides practical solutions and informs public policy. By focusing on real-world utility, applied anthropologists ensure that the insights gained from research are put to use for the benefit of diverse human communities.

43. (C) Both Statement I and Statement II are correct
Ethnocentrism is a common human tendency to view one's own culture as the standard for others. To counter this, anthropologists use cultural relativism as a methodological tool to observe and analyze societies without judgment. This approach allows researchers to remain objective and gain a deeper understanding of diverse cultural practices by viewing them within their own specific social and historical contexts.

44. (A) Both A and R are true and R is the correct explanation of A
Anthropology and sociology are often called twin sisters because they share the primary goal of studying human society and social behavior. While their traditional focuses differed—anthropology on small-scale societies and sociology on industrialized ones—their methodologies and theories have increasingly converged. Both disciplines provide essential insights into how social structures and cultural norms influence human interaction and the organization of society.

45. (C) Forensic Anthropology
Forensic anthropology is the most useful subfield for identifying victims of natural disasters, as it specializes in the analysis of human skeletal remains. Experts in this field can determine biological profiles and provide forensic evidence even when remains are significantly damaged. Their work is essential for bringing closure to families and assisting in legal processes following catastrophic events that result in mass casualties.

46. (D) Emic – Scientist's view
The emic approach represents the insider's view, focusing on the perspective and categories of the cultural members themselves. In contrast, the etic approach is the scientist's or observer's view, which uses external frameworks for analysis. Mistaking the emic perspective for the scientist's view is incorrect, as the goal of the emic method is to capture the local and subjective meanings.

47. (A) P-1, Q-2, R-3, S-4
Bronislaw Malinowski is famous for pioneering participant observation, and Franz Boas was a key champion of cultural relativism. The holistic approach represents the all-encompassing study of humanity, while forensic anthropology focuses on skeletal identification for legal purposes. These connections reflect the foundational theories and methods that have shaped the discipline and its various applications in both academic and practical settings.

48. (B) Reliance on strictly quantitative, survey-only methodologies
While quantitative data is sometimes used, anthropology is not characterized by a strict reliance on survey-only methodologies. Instead, the discipline places a strong emphasis on qualitative methods like long-term fieldwork and participant observation to understand human behavior. This approach, combined with a holistic and comparative perspective, allows for a much deeper and more nuanced analysis of social and cultural life.

49. (B) Anthropology and History
Ethnohistory is a specialized field that merges the research methods of anthropology and history. It uses oral traditions, material culture, and archival documents to reconstruct the past of specific cultural groups. This interdisciplinary approach is particularly valuable for studying societies that did not maintain their own written records, providing a more balanced and comprehensive view of their historical and cultural development.

50. (A) 1 and 2 only
Anthropology's colonial history involves providing data that was used for colonial governance and supporting the ideology of the 'civilizing mission.' This relationship means the discipline was not entirely independent of political interests during that period. Understanding this history is crucial for modern anthropologists as they work to address past biases and conduct research that is more ethical and socially responsible.

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17. (B) Physical Anthropology
Forensic anthropology is a specialized application of physical anthropology that utilizes skeletal analysis to assist in legal and criminal investigations. Professionals in this field identify human remains by determining age, sex, ancestry, and trauma. Their expertise is crucial in solving cold cases, identifying victims of mass disasters, and providing testimony in courtrooms regarding the biological profiles of deceased individuals.

18. (A) Disciplines that share social interests but use different scales and methods
While anthropology and sociology both study human society and social behavior, they differ in their traditional methods and the scale of their research. Anthropology often emphasizes long-term, immersive fieldwork in smaller communities, whereas sociology frequently utilizes quantitative surveys and focuses on larger, industrialized populations. Despite these differences, they share many theoretical interests and are often seen as closely related disciplines.

19. (B) P-2, Q-1, R-4, S-3
Cultural relativism involves understanding a culture based on its own terms, whereas ethnocentrism is the act of judging others by one's own standards. The emic perspective represents the internal view of a cultural insider, while the etic perspective refers to the objective, external view of the researcher. These concepts are fundamental tools that help anthropologists navigate the complexities of fieldwork.

20. (D) It argues that some cultures are inherently more developed than others
Cultural relativism explicitly rejects the idea that any culture is inherently more developed or superior to another. It serves as a methodological tool to ensure that researchers do not impose their own biases on the societies they study. By focusing on the internal logic of a culture, anthropologists can understand practices within their own context without making hierarchical comparisons or judgments.

21. (C) Economic Anthropology
Studying the redistribution of wealth in ceremonies like the Potlatch is a core focus of economic anthropology. This subfield examines how social relations and cultural values influence the production, distribution, and consumption of goods. Rather than focusing solely on market profit, it explores the diverse ways societies manage resources and reinforce social status through gift-giving and communal exchange practices.

22. (C) 1 and 3 only
Participant observation requires the researcher to live among the community, participating in their daily life while simultaneously observing behavior. This method is not about being invisible but about building rapport to witness social actions in their natural setting. It allows for the collection of rich data on both verbal and non-verbal communication, providing a comprehensive understanding of the society's internal dynamics.

23. (C) Both Statement I and Statement II are correct
Globalization has fundamentally changed the landscape of anthropology by connecting once-isolated societies to global networks. Modern researchers now focus on global flows of people, ideas, and technology, including migration and digital media. This shift ensures that the discipline remains relevant in a rapidly changing world where local cultures are constantly interacting with and being reshaped by international influences and global trends.

24. (A) Both A and R are true and R is the correct explanation of A
During the colonial era, anthropology was often utilized by administrators to gather information about local populations for more effective governance. This data helped colonial powers classify groups based on tribes and castes, which facilitated control and policy implementation. While this period provided a wealth of data, it also raised significant ethical questions about the relationship between academic research and imperial power.

25. (C) A descriptive, fieldwork-based account of a specific human culture
An ethnography is a detailed, descriptive account of a specific culture based on extensive firsthand fieldwork. It provides an in-depth look at the social life, beliefs, and practices of a human group. Unlike ethnology, which involves cross-cultural comparisons, ethnography focuses on a

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western nations. Over time, these disciplines have increasingly overlapped, yet their traditional roots remain a defining part of their academic heritage. Both fields aim to understand social behavior, though they originally employed different methodological scales and research settings.

9. (C) Anthropology and Geography
The study of the relationship between cultural practices and the physical environment represents the intersection of anthropology and geography. This interdisciplinary link explores how human groups adapt their lifestyles, social structures, and technologies to specific ecological conditions. It highlights the influence of climate, terrain, and resources on the development of unique cultural traits and the overall sustainability of diverse societies.

10. (C) 1 and 3 only
The emic perspective prioritizes the viewpoints of the members within a culture, focusing on their specific categories, logic, and perceptions. It aims to understand how local people interpret their own experiences and the world around them. This approach contrasts with the researcher's external framework, ensuring that the internal logic of the society is accurately represented in anthropological findings.

11. (D) Applied Anthropology
Applied anthropology involves using the theories, methods, and data of the discipline to address practical, real-world problems. This field is instrumental in areas like public health, policy making, and community development. By working outside academic settings, applied anthropologists ensure that development projects and social programs are culturally appropriate, sustainable, and sensitive to the specific needs of the communities involved.

12. (B) Participant Observation – Immersive fieldwork method
Participant observation is a hallmark fieldwork method where the researcher lives within a community for an extended period. This immersive approach allows the anthropologist to gain a deep, firsthand understanding of social life and cultural practices. By actively engaging in daily activities while observing behavior, the researcher can capture the subtle nuances of human interaction that surveys might miss.

13. (A) Both A and R are true and R is the correct explanation of A
Medical anthropology bridges the gap between social and biological sciences by examining how cultural beliefs and social structures influence health outcomes. It investigates the diverse ways different societies perceive illness and the efficacy of various healing systems. This interdisciplinary field highlights that health is not merely a biological state but is also shaped by political, economic, and cultural factors.

14. (D) Anthropology and Economics – Focus on global market exchange systems
Economics focuses on market systems and financial theories, while anthropology examines how economic activities are embedded within cultural and social frameworks. Although there is an overlap in studying exchange systems, the claim that anthropology focuses primarily on global market exchange is misleading. Instead, it prioritizes the cultural meanings of production and distribution, often in non-industrial or small-scale economic contexts.

15. (A) Judging other cultures by the standards and values of one's own culture
Ethnocentrism is the universal tendency to view one's own culture as superior and to judge other societies based on its specific standards and values. This mindset often leads to misunderstandings and prejudice against groups with different lifestyles or beliefs. Recognizing and overcoming ethnocentrism is a critical step for researchers who aim to achieve an objective and relativistic understanding of diversity.

16. (A) 1-2-3-4
Anthropological research typically begins with selecting a specific problem or question, followed by immersive fieldwork to gather primary data. Once the data is collected, the researcher moves on to analysis and interpretation to derive meaningful insights. The final stage involves writing an ethnography, which is a detailed descriptive account of the findings that communicates the culture's complexities to others.

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34. (A) Examining the social, economic, and cultural life of Scheduled Tribes
Tribal studies in Indian anthropology focus on the comprehensive examination of the social, economic, and cultural lives of Scheduled Tribes. This includes researching their traditions, languages, and the challenges they face in modern society. This area of study is crucial for policy making and for protecting the rights and heritage of indigenous groups within the diverse fabric of the Indian nation.

35. (C) Linguistic Anthropology – Excavation of burials
Linguistic anthropology is dedicated to the study of language and communication, not the excavation of burials. The excavation of physical sites and human remains is the primary focus of archaeological anthropology and physical anthropology. Linguistic researchers instead examine how speech reflects social status, identity, and cultural values, providing a different but equally vital perspective on the human experience and social interaction.

36. (A) 1-2-3
The history of anthropological thought began with armchair anthropology, where researchers relied on the accounts of travelers and missionaries. This was followed by the development of professional fieldwork, which emphasized immersive stays within the community. Finally, applied anthropology emerged as a way to use these research findings to solve contemporary real-world problems, marking the evolution from speculative study to practical application.

37. (C) Psychology
The culture and personality school explores the deep relationship between anthropology and psychology. It investigates how cultural environments shape the psychological development and personality traits of individuals within a society. By examining the interaction between social norms and individual behavior, this subfield aims to understand how culture is internalized and how it influences the emotional and cognitive patterns of its members.

38. (B) It covers the entire human experience across time and space
The scope of anthropology is vast, covering the entire human experience across all time periods and geographical regions. It is not limited to extinct species or specific modern nations but seeks to understand humans in their totality. This includes their biological evolution, social organizations, cultural practices, and linguistic diversity, making it one of the most comprehensive disciplines in the social sciences.

39. (B) P-2, Q-1, R-4, S-3
Human growth is studied in biological anthropology, while ancient pottery styles are analyzed in archaeological anthropology. Social anthropology examines marriage and family patterns, and linguistic anthropology focuses on dialects and social status. This mapping illustrates how the discipline is divided into specialized sub-fields that each contribute to a more detailed and holistic understanding of the various aspects of human life.

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40. (A) Using oral traditions to study peoples historically ignored by formal records
Anthropology and history are complementary because anthropology often uses oral traditions to study groups that have been ignored by formal written records. This allows for a more inclusive understanding of the past, especially for non-literate societies. While historians traditionally rely on archives, anthropologists provide the cultural context and lived experiences that help reconstruct a more complete history of humanity.

41. (C) Studying cultural and biological factors impacting health and illness
Medical anthropology aims to understand how cultural and biological factors interact to influence health and illness. It studies different healing traditions and the social determinants of wellness across various societies. This research is vital for developing effective health policies that are culturally sensitive and for improving communication between healthcare providers and patients from diverse cultural backgrounds who hold different health beliefs.

42. (A) 1 and 2 only
Applied anthropology utilizes anthropological theories and methods to address contemporary

59. (D) Emic
The emic concept refers to the internal view held by members of a culture about their own society. It focuses on local meanings, beliefs, and the specific categories used by the people being studied. By prioritizing the emic perspective, anthropologists can understand a culture from the inside out, ensuring that their research accurately reflects the logic and lived experience of the community.

60. (B) Social Anthropology
Anthropological studies of the caste system in India fall under social anthropology because they examine social organization, hierarchy, and kinship. Researchers analyze how caste identity influences social interactions, marriage patterns, and economic opportunities. These studies are crucial for understanding the complex social structure of Indian society and the historical and contemporary factors that maintain or challenge traditional hierarchies and social norms.

61. (C) A group's shared way of life, including beliefs and behaviors
In anthropology, culture is defined as the shared way of life of a group, including its beliefs, values, and behaviors. It is not limited to high art or manners but encompasses everything that people learn and share as members of a society. This broad definition allows researchers to study how culture provides the framework for human interaction and the overall organization of social life.

62. (D) Forensic Anthropologist
Analyzing skeletal remains to determine age and sex is a primary task for a forensic anthropologist. This specialized field applies the knowledge of physical anthropology to legal situations, helping to identify unknown individuals. By examining bone structure and development, these experts provide critical information for criminal investigations, disaster victim identification, and historical research involving the analysis of human remains from various contexts.

63. (A) It involves firsthand collection of data in a natural setting
Fieldwork is a foundational method in anthropology that involves the firsthand collection of data in a natural setting. It requires researchers to leave their academic environments and live within the community they are studying. This process allows for a deep understanding of social life through direct observation and participation, providing the primary evidence needed to develop accurate and detailed cultural descriptions.

64. (B) Studying the links between a group's environment and culture
The holistic nature of anthropology is best seen when researchers examine the complex links between a group's environment and its culture. This approach considers how physical surroundings influence social behavior and how cultural practices, in turn, affect the environment. By looking at these integrated systems, anthropologists can provide a more comprehensive and nuanced explanation of the diverse ways human societies adapt.

65. (B) Political Science – State-level politics only
The statement that political science only focuses on state-level politics is incorrect when viewed through an anthropological lens. Anthropology studies political systems across all types of human societies, including those without formal states, such as bands and tribes. This broader focus allows for the study of power, leadership, and social control in a wide variety of cultural contexts, not just modern governments.

66. (A) Studying past human behavior through material remains
Archaeological anthropology focuses on studying past human behavior through the analysis of material remains. By excavating sites and examining artifacts like tools and ruins, archaeologists can reconstruct the lives of people who lived long ago. This subfield is essential for understanding the long-term development of human cultures and the ways that ancient societies interacted with their environments and one another over millennia.

67. (C) S.C. Roy
S.C. Roy is widely recognized as the father of Indian anthropology due to his pioneering research on the tribal populations of India. His detailed ethnographic work helped establish the discipline in the country and provided a foundation for future generations of scholars. His

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51. (C) Emphasizing immersive fieldwork versus extensive survey techniques
The core methodological difference between social anthropology and sociology lies in the emphasis on immersive fieldwork versus extensive survey techniques. Anthropologists typically spend long periods living within a community to gain deep insights through participant observation. Sociologists, while also doing fieldwork, more frequently utilize quantitative surveys to gather data from larger populations, reflecting the different scales and goals of the two disciplines.

52. (D) Anthropologists now study how global forces are localized in specific communities
Anthropologists today study how global forces, such as international media and commerce, are localized and adapted by specific communities. This focus shows that globalization has not made the study of culture irrelevant; rather, it has created new areas of inquiry regarding cultural identity and change. Researchers now examine the complex ways that local traditions interact with and resist global influences in a connected world.

53. (C) Linguistic Anthropology
Linguistic anthropology is the branch concerned with human speech and the various ways people communicate. It explores how language functions as a cultural resource and its role in social interaction. By studying the structure and use of language, researchers gain insights into how people construct social identities and how linguistic patterns reflect and reinforce the shared values and beliefs of a community.

54. (B) Biological
The study of human genetics is a major component of biological anthropology. This subfield investigates the genetic variation within and between human populations, as well as the evolutionary mechanisms that have shaped the species. By analyzing genetic markers, researchers can trace ancient migrations, understand susceptibility to certain diseases, and explore the biological adaptations that allow humans to survive in diverse environments.

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55. (D) Comparing cultures to identify universal and unique human behaviors
The comparative method in anthropology involves analyzing different cultures to identify universal human behaviors as well as unique cultural variations. By looking at a wide range of societies, anthropologists can test theories about social organization and development. This systematic comparison is essential for avoiding ethnocentric biases and for building a broad, cross-cultural understanding of the many ways people live and interact.

56. (A) Obligating anthropologists to support harmful or violent practices
Cultural relativism is a methodological tool for understanding, not an obligation to support harmful or violent practices. It encourages researchers to withhold judgment to better analyze the internal logic of a culture. While it promotes empathy and open-mindedness, it does not mean that anthropologists must abandon their own ethical standards or ignore issues like human rights when evaluating social practices.

57. (C) The cultural context of economic production and distribution
The relationship between anthropology and economics is most evident in the study of the cultural context of economic activities. Anthropologists examine how social relations, traditions, and values influence the production and distribution of goods. This approach provides a more holistic view than formal economic theories, as it considers how economic systems are deeply embedded within the larger social and cultural framework.

58. (C) Both Statement I and Statement II are correct
Anthropology is uniquely positioned as both a science and a humanity. It utilizes scientific methods for data collection and analysis, particularly in its biological and archaeological branches. Simultaneously, it is a humanity because it explores human meaning, values, and creative expression. This dual nature allows for a comprehensive approach that bridges the gap between objective empirical research and subjective cultural interpretation.

single community, offering what is often called a 'thick description' of the nuanced reality of that group's daily existence.

26. (A) Its ability to provide a cross-cultural perspective on human behavior
Anthropology's unique contribution to the social sciences lies in its cross-cultural perspective and holistic approach. By studying human behavior in diverse settings and time periods, it challenges ethnocentric assumptions and offers a broader understanding of what it means to be human. This comparative lens allows for the development of more inclusive theories regarding social organization, culture, and individual human behavior.

27. (C) P-3, Q-1, R-2, S-4
Psychology relates to anthropology through culture and personality studies, while political science connects via the study of power in stateless societies. History and anthropology intersect through the analysis of past cultural changes, and biology links to the discipline via human genetics. These interdisciplinary connections demonstrate how anthropology utilizes diverse perspectives to create a comprehensive understanding of human life and social structures.

28. (B) It prioritizes the subjective meanings assigned by the local people
The etic approach prioritizes the objective categories and theories used by the scientific community rather than the subjective meanings of local people. It aims to find universal laws or patterns that can be compared across different cultures using standardized criteria. While it provides a structured framework for research, it does not focus on the internal perspective of the cultural members themselves.

29. (C) Ensuring development projects are culturally sensitive and sustainable
In the context of development, applied anthropology focuses on making projects culturally sensitive and sustainable. Researchers work to ensure that new initiatives respect local traditions and meet the actual needs of the community. By acting as a bridge between development agencies and local populations, anthropologists help prevent the negative social impacts that can occur when external projects are implemented without cultural understanding.

30. (C) 1 and 3 only
Anthropology is characterized by its use of the comparative method and a strong emphasis on long-term fieldwork. It is not limited to the physical body but encompasses the totality of the human experience, including social, cultural, and linguistic aspects. These features allow researchers to build a holistic and detailed understanding of diverse human societies and their historical development over time.

31. (A) Large-scale, controlled laboratory experiments on human groups
Social anthropology relies on immersive methods like participant observation, in-depth interviews, and the genealogical method. Large-scale, controlled laboratory experiments are generally not part of its traditional methodology because the focus is on studying people in their natural social environments. The discipline prioritizes qualitative data that captures the complexities of real-life interactions rather than isolated variables within a highly controlled laboratory setting.

32. (B) Political Science
Comparing concepts of authority between tribal chiefs and modern political leaders bridges the gap between anthropology and political science. This research explores how power is organized and exercised in different social structures, from egalitarian groups to complex states. It provides insights into the nature of leadership, social control, and the diverse ways that human societies establish and maintain political order.

33. (A) Both A and R are true and R is the correct explanation of A
Ethnocentrism can lead to prejudice because it involves the belief that one's own cultural norms are the only correct way to live. When people judge others solely by their own standards, they often view different practices as inferior or wrong. This assumption hinders cross-cultural understanding and can create social friction, making it a significant barrier to objective social research and diplomacy.

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focus on the social and cultural lives of indigenous groups remains a significant contribution to the study of Indian diversity.

68. (D) Anthropology and Psychology
Studying how different cultures perceive mental health bridges the gap between anthropology and psychology. This research explores how cultural beliefs shape the experience and treatment of mental illness. By understanding these diverse perspectives, anthropologists and psychologists can work together to develop more effective and culturally sensitive mental health services that respect the unique cultural contexts and belief systems of different human populations.

69. (C) Purely theoretical debate about the origin of the universe
Purely theoretical debates about the origin of the universe are generally not considered applied anthropology, as they lack a direct application to solving contemporary social problems. Applied anthropology is defined by its focus on practical issues like public health, development, and policy making. While theoretical research provides the foundation for the discipline, the applied branch is characterized by its engagement with real-world challenges.

70. (B) It often leads to the misunderstanding of other cultures
Ethnocentrism often leads to the misunderstanding of other cultures because it involves judging them based on one's own biased standards. This mindset can hinder objective research and create social conflict. For anthropologists, recognizing ethnocentrism is crucial for developing a more accurate and respectful understanding of human diversity, allowing them to see the value and logic in practices that might initially seem strange.

71. (D) Political Anthropology
When anthropologists study how power and social control are exercised in societies without formal governments, they are engaging in political anthropology. This subfield examines leadership, decision-making, and conflict resolution in diverse settings, from small-scale egalitarian groups to complex modern states. It provides insights into the fundamental nature of political life and the various ways that human societies organize power and authority.

72. (A) It is based on secondary data found in newspapers
The statement that ethnography is based on secondary data from newspapers is incorrect; it is primarily based on primary data collected through firsthand fieldwork. Ethnography requires the researcher to immerse themselves in a culture and participate in daily life to provide a 'thick description.' While secondary sources might offer some context, the heart of an ethnography is the information gathered directly by the researcher.

73. (C) Physical Anthropology
The study of primates is a key part of physical (or biological) anthropology. This subfield, known as primatology, examines the behavior, biology, and evolution of non-human primates to gain insights into our own evolutionary history. By studying our closest living relatives, anthropologists can better understand the biological foundations of human behavior and the processes that led to the development of the human species.

74. (A) Judging a culture by its own standards instead of another's
Cultural relativism is the principle of understanding and judging a culture by its own standards and values rather than by those of another society. This approach is fundamental to anthropology as it helps researchers avoid ethnocentric bias and achieve a more objective view of human diversity. It allows for a deeper appreciation of the internal logic and meaning behind diverse cultural practices.

75. (C) Both Statement I and Statement II are correct
Both anthropology and geography explore the relationship between humans and their environment, but anthropology focuses more on the cultural adaptations that groups develop to survive. This includes studying how social structures and traditions are influenced by ecological factors. Together, these disciplines provide a more complete understanding of the ways that human life is both shaped by and actively shapes the physical world.

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76. (B) Human
The word 'Anthropos' is Greek for 'human,' which is the root of the term anthropology. This indicates that the discipline is centrally focused on the study of the human species in its entirety.

From its biological origins to its complex cultural systems, anthropology seeks to understand what it means to be human across all cultures and throughout the long history of our species.

77. (C) Archaeological Anthropology – Contemporary spoken languages
The pair linking archaeological anthropology with contemporary spoken languages is incorrect. Archaeological anthropology is focused on the study of the past through material remains, while the study of contemporary spoken languages is the primary focus of linguistic anthropology. Each branch of anthropology has a distinct area of specialization that contributes to the discipline's holistic understanding of the human experience across time.

78. (D) Emic
When a researcher records that local people believe illness is caused by spirits, they are using an emic approach. This method focuses on the internal perspective and meanings held by the members of the culture themselves. By prioritizing these local explanations, anthropologists can understand how a society interprets its own experiences and how these beliefs influence their behavior and social organization.

79. (A) It often served the interests of the ruling empire
A significant negative aspect of the colonial phase of anthropology was that it often served the interests of the ruling empire. Anthropological data was used to facilitate control over local populations and to support colonial ideologies. Recognizing this history is essential for modern researchers as they work to ensure that current anthropology is ethical, transparent, and focused on the needs of the communities.

80. (B) The localization of global products and ideological concepts
In the study of globalization, anthropologists focus on the localization of global products and ideas. They examine how international influences are adopted and reshaped by local cultures, rather than just creating a singular global culture. This research highlights the resilience of local identities and the creative ways that communities engage with and transform global forces to fit their own unique social contexts.

81. (B) Archaeological
Archaeological anthropology is the branch that would study ancient cave paintings to understand the lives and beliefs of early human societies. By analyzing these visual remains, researchers can gain insights into the cognitive development, symbolic systems, and daily activities of prehistoric people. This work is essential for piecing together the history of human culture before the emergence of written records.

82. (A) Kinship and descent
The genealogical method is a standard anthropological technique used to study kinship, descent, and marriage patterns within a community. By tracing family histories and relations, researchers can understand the social structure and inheritance rules of a society. This method is particularly useful in cultures where kinship is a primary organizing principle, providing a clear map of how individuals are related to one another.

83. (C) It is strictly forbidden from working with NGOs
The statement that applied anthropology is strictly forbidden from working with NGOs is incorrect. In fact, applied anthropologists frequently work with non-governmental organizations to design and implement community development projects. Their role is to ensure that these programs are culturally appropriate and effective. By collaborating with various organizations, applied anthropologists put their research into practice to address contemporary global and local social issues.

84. (D) Freudian Psychology
The culture and personality school was heavily influenced by Freudian psychology, focusing on how early childhood experiences and cultural norms shape the adult personality. Researchers in this field sought to understand the 'basic personality' or 'national character' of different groups. This approach highlights the deep connection between social environment and psychological development, illustrating how culture is internalized by individual members of a society.

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85. (C) Focusing on meanings within the society being studied
The emic approach is characterized by focusing on the meanings and categories within the society being studied. It seeks to understand the world from the perspective of the cultural insider, rather than applying the researcher's own external framework. This method is essential for capturing the internal logic of a culture and for providing an accurate representation of the beliefs and values of the community.

86. (A) Both A and R are true and R is the correct explanation of A
Anthropology is a comparative science because it seeks to identify patterns of human behavior by looking at a wide variety of societies. By comparing data across different cultures, anthropologists can determine which traits are universal and which are unique to specific groups. This systematic comparison is a key part of the scientific method in anthropology and is essential for developing broad theories of humanity.

87. (D) It studies how language influences social life
Linguistic anthropology is the study of how language influences social life and communication. It explores the relationship between speech patterns and social structures, identity, and power. Unlike the formal study of literature, it focuses on how language is used in daily interaction and how linguistic diversity reflects cultural values. This subfield provides essential insights into the role of communication in the human experience.

88. (A) Bronislaw Malinowski
Bronislaw Malinowski is famously credited with pioneering participant observation during his fieldwork in the Trobriand Islands. He emphasized the importance of living among the community and learning their language to understand their way of life from the inside. This immersive approach revolutionized the discipline and established a new standard for anthropological research that remains a core part of the methodology today.

89. (C) Ethnocentrism – Objective study of others
The pair linking ethnocentrism with the 'objective study of others' is incorrect. Ethnocentrism is the biased view that one's own culture is superior, which is the opposite of an objective approach. Objective study requires cultural relativism and the recognition of personal biases. Ethnocentrism acts as a barrier to true understanding, making it essential for researchers to identify and mitigate its influence during fieldwork.

90. (C) Both Statement I and Statement II are correct
Anthropologists study both the biological evolution of the human brain and how its capacity allows for the creation of complex cultures. This dual focus highlights the discipline's holistic approach, linking physical development with cultural behavior. By understanding the brain's evolution, researchers can better explain the emergence of the unique human ability to create, share, and transmit culture across generations and diverse environments.

91. (D) The tectonic shifts of the Earth's lithospheric plates
Anthropology is a broad discipline but it does not typically study the tectonic shifts of the Earth's plates, which is the domain of geology. Instead, it focuses on human-related topics like urban social dynamics, biological evolution, and linguistic patterns. While it interacts with many other fields, its primary mission is to understand the biological and cultural complexities of the human species throughout history.

92. (B) To recognize and mitigate personal cultural prejudices
Studying ethnocentrism is important because it helps researchers recognize and mitigate their own cultural prejudices. By understanding how biased views can distort observations, anthropologists can work toward a more objective and relativistic understanding of other societies. This self-awareness is crucial for conducting ethical research and for building a more accurate and respectful picture of human diversity and its various cultural expressions.

93. (C) Studying human evolution through fossilized remains
Paleoanthropology is the study of human evolution through the analysis of fossilized remains of ancient ancestors. Researchers in this field examine bone structures and tools to piece together the history of how the human species developed over millions of years. This

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local group.

27. Consider the following cultural characteristics of tribal populations:
1. Strong sense of kinship and lineage.
2. Practice of distinct religious beliefs (e.g., Animism).
3. Universal participation in the formal global stock market.

Which of the statements given above are correct?
(A) 1 and 2 only
(B) 2 and 3 only
(C) 1 and 3 only
(D) 1, 2, and 3

28. Which of the following is a major health challenge frequently observed in Indian tribal populations?
(A) Excessively high levels of obesity compared to urbanites.
(B) High prevalence of communicable diseases and malnutrition.
(C) Complete lack of genetic disorders.
(D) Higher life expectancy than the national average.

29. A "rural population" is generally defined by its:
(A) High population density and industrial economy.
(B) Proximity to large seaports and international trade hubs.
(C) Low population density and primary reliance on agriculture.
(D) Relative isolation from urban administrative centers.

30. Read the following statements regarding the health of rural populations and select the correct option.
Assertion (A): Rural populations often show different health profiles compared to urban populations.
Reason (R): Rural areas typically have better access to tertiary healthcare facilities and specialized doctors.
(A) Both A and R are true and R is the correct explanation of A.
(B) Both A and R are true but R is not the correct explanation of A.
(C) A is true but R is false.
(D) A is false but R is true.

31. Occupational variation in rural populations is primarily centered around:
(A) Primary sector activities like farming, fishing, and husbandry.
(B) Information Technology, Software Development, and data management.
(C) Large-scale manufacturing processes involving heavy machinery.
(D) Stock market trading and high-level financial consultancy roles.

32. Which biological characteristic is more likely to be found in rural populations due to their lifestyle?
(A) Lower physical activity levels than their urban counterparts.
(B) Higher physical endurance and strength from manual labor.
(C) Increased incidence of repetitive strain from modern desk work.
(D) Genetic similarity within the local population.

33. Urban populations are characterized by:
(A) Homogeneous cultural practices and nomadic lifestyles.
(B) High population density and heterogeneous social composition.
(C) Primary dependence on forest produce for sustenance.
(D) Low levels of social mobility and fixed hereditary roles.

34. Which of the following is a common biological change associated with urbanization?
(A) Earlier onset of menarche in females due to improved nutrition.
(B) Significant increase in skeletal robusticity due to decreased activity.
(C) Reduction in the frequency of specific infectious diseases.
(D) Decrease in the average height of the population over generations.

35. Match List I with List II regarding population types and their health concerns.
List I: (Population Type)
P. Tribal Population
Q. Rural Population
R. Urban Population
S. Migrant Population

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CHAPTER 09
Human Variation

1. Which of the following best defines the concept of human variation?
(A) Systematic study of cross-cultural personality traits and social behaviors.
(B) Range of possible physical and mental characteristic values in humans.
(C) The uniform biological makeup found in humans living in specific regions.
(D) Statistical averages of height and weight for a specific demographic group.

2. Identify the INCORRECT statement regarding the sources of biological variation in humans.
(A) Biological variation is determined largely by the chromosomal count of an individual.
(B) Genetic mutations provide the raw material for evolutionary change and variation.
(C) Environmental factors can influence the expression of certain genetic traits.
(D) Recombination during meiosis contributes significantly to offspring diversity.

3. Consider the following statements regarding biological variation:
I. Continuous variation features a range of phenotypes with intermediate forms.
II. Discontinuous variation involves clear-cut categories with no intermediate forms.
Which of the above statement(s) is/are correct?
(A) Only I
(B) Only II
(C) Both I and II
(D) Neither I nor II

4. Which of the following is a classic example of discontinuous variation in human populations?
(A) Body mass index
(B) Skin pigmentation levels
(C) Adult standing height
(D) ABO blood group system

5. In the context of human variation, what does "phenotypic variation" specifically refer to?
(A) The total sum of all recessive alleles present in a population.
(B) Internal genetic codes that remain unexpressed in the environment.
(C) Observable physical or biochemical characteristics of an organism.
(D) The variation caused by non-inheritable accidents and trauma.

6. Which term describes the genetic makeup of an individual that contributes to their physical traits?
(A) Morphotype
(B) Genotype
(C) Ecotype
(D) Serotype

7. Historically, the concept of "race" was primarily used by early scholars to:
(A) Map the migration patterns of ancient hominids through DNA.
(B) Prove that all humans belong to a single biological subspecies.
(C) Study the impact of nutrition on brain development in children.
(D) Classify human groups based on arbitrary physical characteristics.

8. Identify the correct pair of researcher and their contribution to racial classification.
(A) Blumenbach — Five-fold human division
(B) Hooton — The generalized theory of clines
(C) Darwin — Global ABO blood group systems
(D) Bergmann — The standardized hair form index

9. Consider the following statements about Johann Friedrich Blumenbach's classification:
1. He recognized five primary varieties of mankind.
2. His classification was based on the shape of the human skull.
3. He introduced the term "Caucasian" to describe the European variety.
Which of the statements given above are correct?

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(D) Urbanization has no impact on the average age of sexual maturity.

63. Which nasal index value would categorize a nose as "Chamaerrhine" (broad)?
(A) Below 50
(B) 50 – 69.9
(C) 70 – 84.9
(D) 85 and above

64. The "Cultural characteristics" of rural populations often include:
(A) Anonymity and weak social ties.
(B) Reliance on traditional knowledge and folklore.
(C) A fast-paced, clock-regulated lifestyle.
(D) High levels of specialization in service industries.

65. Which of the following is an example of an "adaptive trait" in human variation?
(A) General shape of the external human ear lobe.
(B) Increased lung capacity in high-altitude groups.
(C) Preferred color of an individual's daily clothing.
(D) Ability to speak multiple languages with fluency.

66. In the rural-urban continuum, "suburbanization" represents:
(A) Transitional zone with mixed rural and urban features.
(B) Significant migration away from major urban city centers.
(C) Process of turning forests into tribal reserve land.
(D) Migration of urban people back to primitive farming.

67. Which of the following statements is correct?
(A) Race is a biologically precise term with clear DNA boundaries.
(B) Rural populations have higher access to high-tech gyms.
(C) Most human traits vary continuously rather than discretely.
(D) Genetic drift primarily affects small, isolated populations.

68. Which of the following groups is often cited for having "mesorrhine" noses?
(A) Typical Caucasoid population groups
(B) Extreme Negroid population groups
(C) Arctic Eskimo population groups
(D) Many Indian populations (intermediate)

69. What is "genetic drift"?
(A) Movement of people from one country to another.
(B) Intentional genetic modification in a laboratory.
(C) Random allele frequency changes in small groups.
(D) Natural selection favoring the strongest members.

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70. Why is the study of human variation important in anthropology?
(A) To prove that certain groups are superior to others.
(B) To understand how humans adapt to diverse environments.
(C) To create a perfect map of all human ancestors.
(D) To eliminate the differences between different cultures.

71. Which statement regarding tribal health is correct?
(A) Full access to modern medicine within India.
(B) Lower levels of psychological stress than urban populations.
(C) High prevalence of nutritional anemia in many tribal women.
(D) Higher frequency of rare recessive disorders due to endogamy.

72. The "steatopygia" trait (high fat storage in buttocks) is historically noted in:
(A) Khoisan populations of Southern Africa
(B) Nordic populations of Northern Europe
(C) Alpine populations found across Europe
(D) Amazonian tribes of South America

73. Identify the INCORRECT pair regarding population types and migration.
(A) Rural population — Primary economic sector
(B) Urban population — Social heterogeneity

18. Consider the following statements regarding skin color variation:
1. Melanin is the primary pigment responsible for skin color.
2. Natural selection has favored lighter skin in high-latitude regions.
3. Diet is the only factor that determines skin reflectance.

Which of the statements given above are correct?
(A) 1 and 2 only
(B) 2 and 3 only
(C) 1 and 3 only
(D) 1, 2, and 3

19. Bergmann's Rule states that among broadly distributed mammal species, populations in colder climates tend to have:
(A) Shorter limbs and ear appendages to help conserve heat.
(B) Darker fur or skin tones to absorb more incoming solar radiation.
(C) Larger body sizes to lower surface-area-to-volume ratio.
(D) Higher metabolic rates that function regardless of total body mass.

20. Read the following statements regarding Allen's Rule and select the correct option.
Assertion (A): Allen's Rule explains that animals in hot climates often have longer appendages.
Reason (R): Long appendages increase the surface area for more efficient heat dissipation.
(A) Both A and R are true and R is the correct explanation of A.
(B) Both A and R are true but R is not the correct explanation of A.
(C) A is true but R is false.
(D) A is false but R is true.

21. Which type of hair form is characterized by a flat cross-section and is commonly found in African populations?
(A) Leiotrichous (Straight)
(B) Cymotrichous (Wavy)
(C) Ulotrichous (Woolly)
(D) Helitrichous (Spiral)

22. Arrange the following hair forms in order of increasing curliness (from straightest to most curled):
1. Cymotrichous
2. Ulotrichous
3. Leiotrichous

(A) 3-1-2
(B) 1-2-3
(C) 2-1-3
(D) 3-2-1

23. Stature variation in humans is influenced by:
(A) Genetic factors primarily.
(B) Nutrition and health environment during growth periods.
(C) Atmospheric pressure at birth.
(D) Both genetic potential and environmental factors.

24. Which of the following is a primary characteristic used to define a "tribal population"?
(A) Geographic isolation and a distinct cultural identity.
(B) Total dependence on high-technology industrial production.
(C) Residence in urban metropolitan centers.
(D) Use of a national language as their primary mother tongue.

25. Match List I with List II regarding tribal zones in India.
List I: (Tribal Zone in India)
P. North-Northeastern Zone
Q. Central Zone
R. Southern Zone
S. Western Zone
List II: (State/Region)
1. Rajasthan and Gujarat
2. Nagaland and Manipur
3. Madhya Pradesh and Chhattisgarh
4. Kerala and Tamil Nadu

(A) P-2, Q-3, R-4, S-1
(B) P-3, Q-2, R-1, S-4
(C) P-2, Q-1, R-3, S-4
(D) P-4, Q-3, R-2, S-1

26. Biological characteristics of tribal populations in India often include:
(A) High frequency of specific genetic markers like Sickle Cell Trait.
(B) Uniformity in blood group distributions across all regional tribal groups.
(C) Decreased susceptibility to many infectious diseases.
(D) Low levels of genetic variation within the

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(A) 1 and 2 only
(B) 2 and 3 only
(C) 1 and 3 only
(D) 1, 2, and 3

10. Read the following statements and select the correct option.
Assertion (A): Earnest Hooton viewed races as groups of people possessing a combination of certain physical traits.
Reason (R): Hooton believed that racial traits were purely cultural and had no biological basis.
(A) Both A and R are true and R is the correct explanation of A.
(B) Both A and R are true but R is not the correct explanation of A.
(C) A is true but R is false.
(D) A is false but R is true.

11. Modern biological anthropology critiques the traditional concept of race because:
(A) Genetic variation within any so-called race is less than variation between them.
(B) It is impossible to sequence the genome of different ethnic groups.
(C) Human populations have remained isolated for millions of years.
(D) Biological traits often vary independently rather than in fixed packages.

12. Arrange the following historical developments in the study of human variation in chronological order:
1. UNESCO Statement on Race
2. Blumenbach's Five-fold Classification
3. Introduction of the Cline concept by Julian Huxley
4. Linnaeus's Systema Naturae human classification
(A) 4-2-3-1
(B) 2-4-1-3
(C) 4-2-1-3
(D) 2-4-3-1

13. According to the UNESCO statements on race (1950/1951), race is best understood as a:
(A) Rigid biological reality with distinct mental capacities.
(B) Method to determine the evolutionary hierarchy of nations.
(C) Social myth rather than a biological phenomenon.
(D) Tool for classifying individuals into pure genetic lines.

14. The concept of a "cline" in human variation refers to:
(A) The sharp boundary between two distinct racial groups.
(B) The mutation rate of a specific allele in a closed population.
(C) The tendency of island populations to decrease in size.
(D) A gradual change in a trait's frequency over geographic space.

15. Match List I with List II regarding anthropological rules and concepts.
List I: (Anthropological Rule/Concept)
P. Bergmann's Rule
Q. Allen's Rule
R. Gloger's Rule
S. Cline Concept
List II: (Focus of Variation)
1. Pigmentation and humidity
2. Body size and temperature
3. Continuous geographic gradient
4. Protruding parts and temperature
(A) P-2, Q-4, R-1, S-3
(B) P-4, Q-2, R-3, S-1
(C) P-2, Q-1, R-4, S-3
(D) P-3, Q-4, R-1, S-2

16. What is the adaptive significance of dark skin color in populations living near the equator?
(A) To facilitate the synthesis of Vitamin D in low sunlight.
(B) To protect against the breakdown of folate by UV radiation.
(C) To increase the absorption of heat during the winter months.
(D) To reduce the risk of respiratory infections in humid air.

17. Which of the following facial features is often associated with adaptation to cold, dry climates?
(A) Wide, flat nostrils
(B) Narrow, elongated noses
(C) Thin lips with minimal surface area
(D) Pronounced alveolar proganthism

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List II: (Key Health Concern)
1. Lifestyle diseases (Obesity, Stress)
2. Occupational hazards in farming
3. Endemic infectious diseases
4. Psychosocial adjustment issues

(A) P-3, Q-2, R-1, S-4
(B) P-1, Q-2, R-3, S-4
(C) P-3, Q-4, R-1, S-2
(D) P-2, Q-3, R-4, S-1

36. Consider the following regarding the "Tribal-Rural-Urban Continuum":
1. It describes the flow of people and culture between these sectors.
2. It assumes that these categories are mutually exclusive and static.
3. Migration plays a key role in bridging these populations.

Which of the statements given above are correct?
(A) 1 and 2 only
(B) 2 and 3 only
(C) 1 and 3 only
(D) 1, 2, and 3

37. Migration influences human variation primarily by:
(A) Decreasing the gene flow between different populations.
(B) Influencing individuals to remain in their ancestral homeland.
(C) Promoting genetic admixture and changing allele frequencies.
(D) Increasing the rate of spontaneous mutations in the brain.

38. Consider the following factors influencing rural-to-urban migration and population distribution:
1. Lack of educational opportunities in villages.
2. High demand for labor in urban factories.
3. Natural disasters or soil exhaustion in rural areas.

Which of the statements given above are correct?
(A) 1 and 2 only
(B) 2 and 3 only
(C) 1 and 3 only
(D) 1, 2, and 3

39. The health profile of urban populations often shows a rise in:
(A) Nutritional deficiency diseases such as scurvy or rickets.
(B) Genetic disorders caused by extreme reproductive isolation.
(C) Conditions caused by high levels of environmental pollutants.
(D) Chronic non-communicable diseases like Type II diabetes.

40. Read the following statements and select the correct option.
Assertion (A): Migration can lead to the "founder effect" in new populations.
Reason (R): Small groups moving to new areas carry only a fraction of the original population's genetic diversity.
(A) Both A and R are true and R is the correct explanation of A.
(B) Both A and R are true but R is not the correct explanation of A.
(C) A is true but R is false.
(D) A is false but R is true.

41. Which factor is considered a major environmental source of human biological variation?
(A) Political ideologies
(B) Religious scriptures
(C) Solar radiation levels
(D) Computer literacy

42. Which of the following pairs regarding head and nose shape is correctly matched?
(A) Mesocephalic — Intermediate head shape
(B) Dolichocephalic — Characterized by broad heads
(C) Brachycephalic — Characterized by long heads
(D) Leptorrhine — Characterized by a very broad nose

43. Which of the following is an example of continuous variation?
(A) Fingerprint patterns
(B) Presence or absence of a hitchhiker's thumb
(C) Albinism
(D) Total body weight

44. The "Out of Africa" model of human variation suggests that:
(A) Human races evolved independently in different continents for millions of years.

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work provides the biological foundation for understanding human origins and the various physical changes that led to the emergence of modern Homo sapiens.

94. (D) Studying political systems in diverse human societies
The relationship between anthropology and political science is seen in the study of political systems across all types of human societies. This includes examining power, leadership, and social control in both small-scale communities and modern nation-states. By studying these diverse systems, anthropologists provide a broader perspective on how humans organize their social and political lives and how different cultures maintain order and authority.

95. (A) British colonial officials and later Indian academics
In India, tribal studies were initially started by British colonial officials who gathered data to assist in governance. Over time, this focus was expanded by Indian academics who brought a more detailed and sympathetic understanding to the study of indigenous groups. This history highlights the evolving nature of the discipline and the importance of tribal research in understanding the diverse social fabric of the country.

96. (B) It requires anthropologists to ignore biological data
The statement that the holistic approach requires anthropologists to ignore biological data is incorrect. In fact, holism means integrating all types of information—social, cultural, linguistic, and biological—to understand the complete human experience. By looking at the 'big picture,' anthropologists can explain the complex interactions between different aspects of human life, providing a much more thorough and nuanced understanding of our species.

97. (B) Every culture should be understood in its own context
Cultural relativism suggests that every culture should be understood within its own specific social and historical context. It rejects the idea that cultures can be ranked in a hierarchy of development. By viewing practices through the lens of the community that performs them, anthropologists can gain a deeper and more respectful understanding of human diversity without imposing their own external judgments or biases.

98. (A) Greek
The term anthropology is derived from the Greek language, combining 'anthropos,' meaning human, and 'logos,' meaning study or reason. This reflects the discipline's fundamental mission as the systematic study of humanity. From its ancient linguistic roots to its modern applications, anthropology has remained dedicated to exploring the biological and cultural complexities that define our species across all time periods and geographical regions.

99. (C) Complementary
The relationship between anthropology and history is often described as complementary because they provide different but equally valuable perspectives on the past. While history focuses on written records, anthropology offers cultural context and the study of non-literate societies through archaeology and oral traditions. Together, they create a more complete and inclusive history of the human experience, ensuring that all groups are represented.

100. (D) Providing insights into diversity and global challenges
Today, anthropology is highly relevant because it provides essential insights into human diversity and the complex challenges of a globalized world. It is no longer just a study of the past but a tool for addressing contemporary issues like migration, climate change, and public health. By offering a cross-cultural perspective, anthropology helps foster a more inclusive and empathetic understanding of the diverse ways people live.

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53. Which of the following is NOT a biological characteristic of tribal populations?
(A) High incidence of endogamy.
(B) Adaptation to specific local ecological niches.
(C) Universal presence of the "wisdom gene."
(D) Distinctive frequencies of HLA markers.

54. What does the term "secular trend" in stature refer to?
(A) Decrease in height caused by religious practices.
(B) Long-term population height change over generations.
(C) Height variation between different castes in India.
(D) Fluctuations of height during different year seasons.

55. Match List I with List II regarding anthropologists and their concepts.
List I: (Anthropologist)
P. Julian Huxley
Q. Carleton Coon
R. Ashley Montagu
S. Risley
List II: (Concept)
1. The Idea of "Man's Most Dangerous Myth"
2. Clines and Gradients
3. Racial classification of India
4. Origin of Races (Evolutionary stages)
(A) P-2, Q-4, R-1, S-3
(B) P-1, Q-2, R-3, S-4
(C) P-2, Q-1, R-4, S-3
(D) P-4, Q-3, R-2, S-1

56. In the context of human variation, "polygenic" traits are those that:
(A) Are influenced by multiple genes at different loci.
(B) Are controlled by a single gene with two alleles.
(C) Are not affected by any environmental factors.
(D) Are found only in male members of the population.

57. Which of the following is a characteristic of "Leiotrichous" hair?
(A) Characterized by a very tight spiral structure.
(B) Typically very thin and naturally blonde strands.
(C) Primarily found in Mongoloid populations.
(D) High degree of curliness or wavy formations.

58. Consider the following characteristics of urban populations:
1. Increased exposure to industrial pollutants.
2. High levels of psychological stress and sedentary habits.
3. Lower rates of inter-ethnic marriage compared to rural areas.
Which of the statements given above are correct?
(A) 1 and 2 only
(B) 2 and 3 only
(C) 1 and 3 only
(D) 1, 2, and 3

59. The study of "dermatoglyphics" involves the variation in:
(A) Skin pigmentation
(B) Bone density
(C) Hair thickness
(D) Fingerprints and palm prints

60. Which of the following is a negative consequence of rapid urbanization on human biology?
(A) Improved cardiovascular health from city walking.
(B) Increased infectious disease risk from population density.
(C) Significant reduction in the frequency of caries.
(D) Reduced reliance on the adaptive immune system.

61. What is the main source of genetic variation during sexual reproduction?
(A) Mitosis
(B) Protein synthesis
(C) Recombination (Crossing over)
(D) Binary fission

62. Identify the INCORRECT statement regarding human populations and variation.
(A) Tribal populations in India are mostly concentrated in the North-East and Central regions.
(B) The health of rural populations is often affected by poor sanitation.
(C) Human variation is a result of the interaction between nature and nurture.

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(B) All modern humans descended from a recent African ancestor.
(C) Variation is highest in populations furthest from Africa.
(D) Neanderthals were the direct ancestors of all modern Asians.

45. Match List I with List II regarding human physical features and their descriptions.
List I: (Feature)
P. Epicanthic fold
Q. Prognathism
R. Steatopygia
S. Alveolar
List II: (Term)
1. Projection of the jaw
2. Fat accumulation on buttocks
3. Eyelid skin fold
4. Relating to the tooth socket
(A) P-3, Q-1, R-2, S-4
(B) P-1, Q-3, R-4, S-2
(C) P-3, Q-2, R-1, S-4
(D) P-2, Q-1, R-3, S-4

46. Which statement about the "genotypic variation" is correct?
(A) Characteristics directly visible to the naked eye.
(B) Variations entirely determined by regional climate.
(C) Fixed traits that remain the same for all species.
(D) Differences in the DNA sequences among individuals.

47. Consider these statements regarding tribal populations in India:
1. The Santhals are primarily found in Eastern India.
2. The Todas are a pastoral tribe of the Nilgiri Hills.
3. The Bhils are largely concentrated in the Himalayan belt.
Which of the statements given above are correct?
(A) 1 and 2 only
(B) 2 and 3 only
(C) 1 and 3 only
(D) 1, 2, and 3

48. Identify the INCORRECT pair regarding physical characteristics of human groups.
(A) Negroid — Characteristic Ulotrichous hair
(B) Caucasoid — Flat nose with wide nostrils
(C) Mongoloid — Presence of the Epicanthic fold
(D) Australoid — Having prominent brow ridges

49. Which of the following best describes "acclimatization"?
(A) Permanent genetic changes in a local population.
(B) Short-term physiological adjustment to environment.
(C) Species extinction caused by rapid climate change.
(D) The behavioral learning of several new languages.

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50. Read the following statements regarding stature and malnutrition and select the correct option.
Assertion (A): Stature is often lower in populations suffering from chronic childhood malnutrition.
Reason (R): Environmental factors like diet can suppress the expression of genetic growth potential.
(A) Both A and R are true and R is the correct explanation of A.
(B) Both A and R are true but R is not the correct explanation of A.
(C) A is true but R is false.
(D) A is false but R is true.

51. The cephalic index is used to measure the variation in:
(A) Stature
(B) Nasal width
(C) Head shape
(D) Skin color

52. Which of the following statements regarding human populations is correct?
(A) Rural populations show varying degrees of genetic exchange with urban populations.
(B) Urbanization usually leads to a decrease in the variety of food choices.
(C) Human variation is limited to differences in blood groups and stature.
(D) Migration is a social process with significant biological consequences.

(C) Tribal population — Traditional industrialism
(D) Human migration — The process of gene flow

74. Which of the following is a source of environmental variation?
(A) Dietary habits
(B) Mutation
(C) Independent assortment
(D) Segregation

75. What is the "nasal index"?
(A) Length of the nose divided by weight of the person.
(B) Number of breaths taken per minute.
(C) The color of the nasal mucosa.
(D) Width of the nose as a percentage of its length.

76. If a population moves from a cold to a tropical climate, which long-term biological change might be favored by natural selection over many generations?
(A) Increased body mass to retain metabolic heat.
(B) Increased sweat efficiency and slender build.
(C) Development of thicker subcutaneous fat layers.
(D) Narrower nostrils to warm the incoming air.

77. Which of the following is a characteristic of urban biological change?
(A) Increased robusticity of human long bones.
(B) Disappearance of the ABO blood group system.
(C) Craniofacial changes due to softer diets.
(D) Higher average birth weight in city areas.

78. Which of the following statements is correct regarding the expression of traits?
(A) Genotype = Phenotype + Migration
(B) Environment = Genotype + Mutation
(C) Variation = Stasis + Isolation
(D) Phenotype = Genotype + Environment

79. The term "Megalopolis" refers to:
(A) Chain of adjacent metropolitan areas.
(B) A very small and isolated tribal village.
(C) A large-scale rural farming cooperative.
(D) An isolated and remote island population.

80. Which of the following is an example of "internal migration"?
(A) Moving from India to the USA.
(B) Moving from a village in Bihar to Delhi.
(C) Moving from the Earth to a space station.
(D) Moving from one continent to another.

81. What is the biological characteristic of urban populations regarding immunity?
(A) Lower exposure to pathogens than rural areas.
(B) Increased vulnerability to "crowd diseases".
(C) Higher resistance to all recognized viruses.
(D) Reduced occurrence of environmental allergies.

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82. Which of the following is NOT a criterion for racial classification according to Hooton?
(A) Intelligence quotient (IQ)
(B) General skin pigmentation
(C) Morphological hair form
(D) The variation in eye color

83. Which tribal group in India is known for practicing polyandry?
(A) Santhals
(B) Bhils
(C) Todas
(D) Gonds

84. The "Cline" concept was introduced to replace the rigid concept of:
(A) Evolution
(B) Genetics
(C) Adaptation
(D) Race

85. Which of the following environmental adaptations is correctly paired?
(A) Desert environment — Thick layer of blubber
(B) Arctic environment — Excessive sweating
(C) High altitude — Increased red blood cell count
(D) Rainforest — High requirement for Vitamin D synthesis

86. Read the following statements and select the correct option.

35. (A) P-3, Q-2, R-1, S-4
Different population types face unique health concerns based on their environments. Tribal populations often deal with endemic infectious diseases, while rural groups face occupational hazards in agriculture. Urban populations are increasingly prone to lifestyle diseases like obesity and stress. Migrant populations often struggle with psychosocial adjustment issues as they transition between different cultural and social environments and settings.

36. (C) 1 and 3 only
The Tribal-Rural-Urban Continuum concept describes the fluid exchange of people and cultural traits between these different sectors. It recognizes that these categories are not isolated or static but are connected through processes like migration and economic interaction. This framework is essential for understanding how human populations change and adapt as they move across different social and geographic landscapes.

37. (C) Promoting genetic admixture and changing allele frequencies.
Migration is a powerful driver of human variation because it facilitates gene flow between previously separated populations. When people move and interbreed with local groups, they introduce new genetic material, leading to genetic admixture. This process alters the allele frequencies within populations, reducing genetic differences between groups and contributing to the overall diversity and evolution of the species.

38. (D) 1, 2, and 3
Several factors drive rural-to-urban migration, including the search for better educational opportunities and the high demand for labor in industrial centers. Additionally, environmental pressures like natural disasters or the exhaustion of agricultural soil can push people away from their villages. These combined socio-economic and environmental factors significantly reshape population distribution and influence the genetic and cultural landscape.

39. (D) Chronic non-communicable diseases like Type II diabetes.
Urban populations often experience a rise in chronic non-communicable diseases, such as Type II diabetes and cardiovascular conditions. This trend is linked to lifestyle changes including sedentary habits, increased consumption of processed foods, and high levels of psychological stress. The transition from active rural lifestyles to urban environments significantly alters the health profile and disease burden of these human groups.

40. (A) Both A and R are true and R is the correct explanation of A.
Migration can trigger the founder effect, which occurs when a small group of individuals migrates to a new location to establish a new population. This new group carries only a limited fraction of the genetic diversity found in the original source population. Consequently, certain genetic traits may become more or less common in the new group purely by chance.

41. (C) Solar radiation levels
Environmental factors play a crucial role in shaping human biological variation over generations. Solar radiation levels are a primary driver, directly influencing the evolution of skin color through natural selection. In areas with high ultraviolet radiation, darker skin evolved to protect against damage, while in regions with low sunlight, lighter skin was favored to ensure sufficient Vitamin D production.

42. (A) Mesocephalic — Intermediate head shape
Anthropometric measurements categorize head and nose shapes into specific types. Mesocephalic refers to an intermediate head shape, falling between the broad-headed brachycephalic and the long-headed dolichocephalic types. Similarly, nasal shapes range from the narrow leptorrhine to the broad chamaerrhine. These indices are used by researchers to analyze the physical diversity and evolutionary adaptations within different human populations across the globe.

43. (D) Total body weight
Total body weight is a classic example of continuous variation because it can take any value within a range and shows a smooth distribution across a population. Unlike discontinuous traits that fall into discrete categories, weight is influenced by a combination of many genes and environmental factors like diet and exercise.

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(B) Higher incidence of myopia (nearsightedness) than urbanites.
(C) Reduced levels of exposure to natural sunlight.
(D) Broad genetic similarities across regional sites.

99. Which anthropologist is famous for the work "The Races of Europe"?
(A) Franz Boas
(B) Margaret Mead
(C) William Z. Ripley
(D) Ruth Benedict

100. In modern anthropology, "race" is replaced by the study of "populations" because:
(A) "Race" is a precise and accurate term.
(B) "Population" only applies to animal life.
(C) There are no genetic human differences.
(D) "Population" is a more fluid study unit.

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ANSWERS

1. (B) Range of possible physical and mental characteristic values in humans.
Human variation encompasses the extensive range of physical and mental characteristics observed within our species across different environments and populations. This concept examines the biological diversity stemming from genetic and environmental interactions, focusing on measurable traits such as stature, pigmentation, and cognitive abilities. It provides a framework for understanding how human populations adapt through evolutionary processes.

2. (A) Biological variation is determined largely by the chromosomal count of an individual.
Biological variation among humans is primarily driven by genetic mutations, recombination during meiosis, and the influence of environmental factors on trait expression. While chromosomal abnormalities occur, the standard human chromosomal count remains constant at forty-six. Identifying variations helps scientists map evolutionary history and understand how diverse traits contribute to the survival of different human groups globally.

3. (C) Both I and II
Variation in biological organisms is categorized into two distinct types based on the distribution of phenotypes. Continuous variation involves a wide spectrum of intermediate forms for traits like height or skin color. Conversely, discontinuous variation features clear-cut categories without intermediates, such as blood types. Both types are essential for studying the genetic diversity and evolution within populations.

4. (D) ABO blood group system
Discontinuous variation refers to traits that fall into discrete, non-overlapping categories without any intermediate forms. The ABO blood group system is a quintessential example because individuals possess specific blood types like A, B, AB, or O. Unlike height, these traits are typically controlled by a single gene or a small number of genes with minimal environmental influence.

5. (C) Observable physical or biochemical characteristics of an organism.
Phenotypic variation describes the observable physical and biochemical characteristics of an individual, which result from the interaction between their genetic code and environmental influences. This includes visible traits like eye color and hair texture, as well as internal biochemical processes. Understanding these variations is crucial for analyzing how different populations respond to various ecological pressures and health challenges.

6. (B) Genotype
The term genotype identifies the specific genetic constitution of an individual, representing the set of alleles inherited from their parents. This internal blueprint determines the potential for various physical and functional traits, which may or may not be fully expressed depending on environmental factors. It serves as the fundamental basis for all biological diversity seen in humans.

7. (D) Classify human groups based on arbitrary physical characteristics.
Historically, scholars utilized the concept of race to categorize human populations into distinct groups based on observable physical traits like skin color, hair texture, and skull shape. These classifications were often arbitrary and failed to account for the underlying genetic continuity between groups. Modern anthropology now recognizes these categories as socially constructed rather than biologically definitive boundaries.

8. (A) Blumenbach — Five-fold human division
Johann Friedrich Blumenbach is renowned for developing one of the earliest influential racial classifications, dividing humanity into five distinct varieties: Caucasian, Mongolian, Ethiopian, American, and Malayan. His work was based on morphological studies of human skulls. This system established a foundational, though now scientifically contested, framework for categorizing global human diversity during the eighteenth and nineteenth centuries.

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9. (D) 1, 2, and 3
Johann Friedrich Blumenbach recognized five primary varieties of mankind based on his extensive research into craniology, focusing on the shape of the human skull. He is famously credited with introducing the term Caucasian to describe the European variety, believing them to be the original form. His three-part methodology combined geographical, morphological, and historical perspectives on human variation.

10. (C) A is true but R is false.
sEarnest Hooton was a prominent physical anthropologist who defined races as groups possessing a unique combination of inherited physical traits. However, he strongly believed that these racial characteristics had a firm biological and evolutionary basis rather than being purely cultural. Therefore, the idea that he dismissed biological foundations is incorrect according to his historical academic contributions and theories.

11. (D) Biological traits often vary independently rather than in fixed packages.
Biological anthropologists argue that traditional racial categories are flawed because human traits often vary independently rather than in fixed, coordinated packages. This phenomenon, known as non-concordance, means that skin color does not reliably predict other traits like blood type or skeletal structure. Modern science favors studying clinal distributions and genetic populations over rigid, arbitrary racial classifications.

12. (A) 4-2-3-1
The study of human variation followed a chronological progression starting with the formal classification by Linnaeus in the mid-eighteenth century. This was followed by Blumenbach's more detailed five-fold system. In the twentieth century, Julian Huxley introduced the concept of the cline to describe gradual variation. Finally, the UNESCO statements on race provided a modern socio-biological critique.

13. (C) Social myth rather than a biological phenomenon.
The UNESCO statements issued in the mid-twentieth century aimed to dismantle scientific racism by asserting that race is a social myth rather than a biological reality. These documents emphasized that all humans belong to the same species and that differences between groups are minor compared to shared genetics. This shift encouraged a focus on ethnicity and cultural identity.

14. (D) A gradual change in a trait's frequency over geographic space.
A cline represents the gradual transition in the frequency of a trait or allele across a geographic area. This concept highlights that human variation is continuous rather than discrete, with no sharp boundaries separating different groups. By mapping clines, researchers can observe how selective pressures, such as solar radiation or climate, influence the biological characteristics of local populations.

15. (A) P-2, Q-4, R-1, S-3
Anthropological rules describe specific patterns of environmental adaptation. Bergmann's rule links body size to temperature, while Allen's rule focuses on the length of limbs and appendages. Gloger's rule associates skin pigmentation with humidity levels in different climates. Finally, the cline concept describes the continuous geographic gradient of traits, providing a comprehensive view of how humans diversify globally.

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16. (B) To protect against the breakdown of folate by UV radiation.
High levels of melanin in dark skin provide a significant evolutionary advantage for populations in equatorial regions by protecting essential nutrients. Specifically, melanin prevents the breakdown of folate, a B-vitamin crucial for reproductive health and fetal development, which can be destroyed by intense ultraviolet radiation. This biological adaptation ensures survival and successful reproduction in high-sunlight environments.

17. (B) Narrow, elongated noses
Human nasal morphology often reflects an adaptation to the local climate. Narrow and elongated noses are typically found in populations living in cold or dry environments. This shape increases the internal surface area and the time air spends in the nasal passage, allowing it to be warmed and humidified before reaching the lungs, thereby protecting delicate respiratory tissues.

Statement I: Tribal populations are mostly endogamous.
Statement II: Endogamy increases the chance of genetic homozygosity.
(A) Statement I is correct, Statement II is incorrect.
(B) Statement II is correct, Statement I is incorrect.
(C) Both statements are correct.
(D) Both statements are incorrect.

87. Which of the following is a cultural characteristic of urban populations?
(A) Strong informal social control.
(B) Homogeneity of language and religion.
(C) Primary focus on ancestral worship.
(D) Secularization and rationalization of life.

88. The concept of "human variation" emphasizes that:
(A) Humans show adaptive ranges of differences.
(B) Humans are biologically identical beings.
(C) Biological differences justify inequality.
(D) Variation is skin deep and medically void.

89. Which of the following factors influences the health profile of rural populations in India?
(A) Over-nutrition and sedentary lifestyle.
(B) High levels of air pollution from heavy traffic.
(C) Seasonal migration for work.
(D) Excessive use of air conditioning.

90. Identify the INCORRECT statement regarding human biological rules and variation.
(A) Skin color is determined by a single gene.
(B) Genetic variation is the basis of evolution.
(C) Bergmann's rule applies to body volume.
(D) Urbanization affects the biological structure of populations.

91. The primary cause of "melanin" production in the skin is the exposure to:
(A) Infrared light rays
(B) Medical X-ray beams
(C) Cosmic gamma rays
(D) Ultraviolet (UV) rays

92. Which of the following is a biological effect of migration?
(A) Genetic Isolation
(B) Gene Flow
(C) Cultural Stagnation
(D) Genetic Homogeneity

93. What is the typical "occupational variation" found in urban areas?
(A) Mostly subsistence farming.
(B) Reliance on gathering wild fruits and honey.
(C) Dominance of secondary and tertiary sectors.
(D) Limited roles within a single industrial office.

94. Which of the following traits is "discontinuous"?
(A) Height
(B) Skin color
(C) Intelligence
(D) Albinism

95. Identify the correctly matched pair regarding environmental rules.
(A) Gloger's Rule — Humid area fauna are darker.
(B) Allen's Rule — Cold-climate animals have tails.
(C) Bergmann's Rule — Hot-climate animals are larger.
(D) Fisher's Rule — Genetic drift is always useful.

96. A researcher finds a population with a high frequency of the sickle cell trait. This is likely an adaptation to:
(A) Extreme cold
(B) Malaria-prone environment
(C) High altitude hypoxia
(D) Lack of Vitamin C in the diet

97. The "Tribal-Rural-Urban Continuum" suggests that:
(A) There is no movement between these groups.
(B) Categories are points on a sliding scale.
(C) Tribal people are biologically superior.
(D) Rural areas will eventually vanish totally.

98. Which of the following is a "biological characteristic" of rural populations?
(A) Exposure to zoonotic diseases from livestock.

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27. (A) 1 and 2 only
Cultural characteristics of tribal groups typically include a deep reliance on kinship structures and the practice of traditional religious beliefs such as animism. These elements define their social cohesion and worldview. However, universal participation in global stock markets is not a characteristic of these populations, as they often operate within localized or subsistence economies rather than formal global finance.

28. (B) High prevalence of communicable diseases and malnutrition.
Indian tribal populations face significant health challenges, including high rates of communicable diseases and persistent malnutrition. These issues are often exacerbated by geographic isolation, limited access to modern healthcare, and socioeconomic marginalization. Additionally, certain genetic disorders like sickle cell anemia are more common due to endogamous marriage practices, requiring specialized medical attention and targeted public health interventions.

29. (C) Low population density and primary reliance on agriculture.
Rural populations are characterized by low population density and an economy that primarily revolves around agriculture and related primary sector activities. These communities often maintain traditional social structures and closer ties to the natural environment compared to urban dwellers. Their lifestyle and diet are typically influenced by seasonal cycles and the local availability of agricultural produce and resources.

30. (C) A is true but R is false.
Rural populations frequently exhibit health profiles that differ from urban ones due to their unique lifestyles and environmental exposures. However, it is incorrect to suggest that rural areas have better access to tertiary healthcare and specialists. In reality, these regions often suffer from a shortage of medical facilities and professionals, which significantly impacts the management of chronic and acute health conditions.

31. (A) Primary sector activities like farming, fishing, and husbandry.
Occupational variation in rural areas is mostly concentrated in the primary economic sector, involving activities like farming, fishing, and animal husbandry. These roles require significant physical labor and are directly tied to the land and local natural resources. Unlike urban centers with diverse service industries, rural economies are generally more homogenous and centered on food production and resource extraction.

32. (B) Higher physical endurance and strength from manual labor.
The lifestyle of rural populations often leads to distinct biological characteristics, such as increased physical endurance and muscle strength. These traits result from the regular manual labor required for traditional farming and other primary sector activities. This high level of physical exertion contrasts with the more sedentary nature of many urban occupations, influencing the overall fitness and health.

33. (B) High population density and heterogeneous social composition.
Urban populations are defined by high population density and a very heterogeneous social composition, featuring people from diverse ethnic, linguistic, and socioeconomic backgrounds. The urban environment fosters complex social networks and high levels of anonymity. Economic life is characterized by secondary and tertiary sectors, offering a wide range of specialized roles that are absent in more traditional rural settings.

34. (A) Earlier onset of menarche in females due to improved nutrition.
Urbanization often brings significant biological changes, including a secular trend toward earlier sexual maturity in females. This earlier onset of menarche is primarily attributed to improved nutritional status and better healthcare access found in city environments. These environmental shifts influence growth and developmental trajectories, demonstrating how social and economic transformations can directly impact the biological processes of human populations.

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52. (D) Migration is a social process with significant biological consequences.
While migration is often studied as a social or economic phenomenon, it has profound biological consequences for human populations. By facilitating gene flow and genetic admixture, migration reshapes the genetic landscape and influences the distribution of traits. It breaks down isolation and introduces new alleles, playing a critical role in the ongoing evolution and biological diversification of the human species.

53. (C) Universal presence of the "wisdom gene."
Tribal populations exhibit several distinct biological traits, including high levels of endogamy and specific adaptations to local ecological niches. They also show unique frequencies of genetic markers like HLA. However, there is no scientific evidence for a universal wisdom gene. Such concepts are mythical and not supported by modern genetics or biological anthropology, which focuses on measurable physical and biochemical traits.

54. (B) Long-term population height change over generations.
A secular trend in stature refers to the gradual, long-term change in the average height of a population over several generations. This phenomenon is typically observed as an increase in height in many developing and developed nations due to improvements in nutrition, sanitation, and healthcare. It highlights the significant impact that changing environmental conditions can have on the biological expression of traits.

55. (A) P-2, Q-4, R-1, S-3
Anthropologists have contributed various foundational concepts to the study of human diversity. Julian Huxley introduced the idea of clines, while Carleton Coon explored the evolutionary origins of races. Ashley Montagu famously critiqued the race concept as a dangerous myth. Herbert Risley is known for his extensive work on the racial classification of the diverse populations within the Indian subcontinent.

56. (A) Are influenced by multiple genes at different loci.
Polygenic traits are those whose expression is controlled by the cumulative effect of multiple genes located at different chromosomal loci. Many common human characteristics, such as skin color, height, and eye color, are polygenic. Because these traits are influenced by many genes, they typically show continuous variation across a population rather than falling into distinct, discrete categories like single-gene traits.

57. (C) Primarily found in Mongoloid populations.
Leiotrichous hair is characterized by a straight structure and a circular cross-section. This hair form is most frequently observed in Mongoloid populations, particularly those in East and Central Asia. It is often thick and dark, reflecting specific genetic lineages. Understanding different hair forms helps anthropologists trace population histories and the biological adaptations of various groups to their specific environments.

58. (A) 1 and 2 only
Urban environments are often associated with increased exposure to industrial pollutants and higher levels of psychological stress. These factors, combined with more sedentary habits, significantly influence the health and biology of urban populations. However, urban areas actually tend to have higher rates of inter-ethnic marriage due to greater social heterogeneity and more opportunities for diverse interactions compared to rural villages.

59. (D) Fingerprints and palm prints
Dermatoglyphics is the scientific study of the skin ridge patterns found on the fingers, palms, and soles of humans. These patterns are formed during fetal development and remain unchanged throughout life. Because they are influenced by both genetics and the prenatal environment, they provide valuable insights into human variation, population relationships, and are widely used in forensic science and medical genetics.

60. (B) Increased infectious disease risk from population density.
Rapid urbanization can lead to negative biological outcomes, most notably an increased risk of infectious diseases. High population density and overcrowding in cities facilitate the

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This results in a spectrum of phenotypes without clear-cut boundaries.

44. (B) All modern humans descended from a recent African ancestor.
The Out of Africa model posits that all modern humans originated from a single population in Africa approximately two hundred thousand years ago. This group subsequently migrated across the globe, replacing earlier hominid populations. This model explains why genetic diversity is highest within African populations and why humans worldwide share a high degree of genetic similarity despite varying physical appearances.

45. (A) P-3, Q-1, R-2, S-4
Human physical features are described using specific anatomical terms. The epicanthic fold is a skin fold on the upper eyelid, while prognathism refers to the forward projection of the jaw. Steatopygia describes significant fat accumulation on the buttocks, often observed in certain Southern African groups. Alveolar refers to the part of the jaw bone that contains the tooth sockets.

46. (D) Differences in the DNA sequences among individuals.
Genotypic variation refers specifically to the differences in DNA sequences among individuals within a population. These genetic differences provide the fundamental blueprint for all biological traits and are the result of mutations, recombination, and gene flow. While environment influences how these genes are expressed as phenotypes, the genotype remains the inherited genetic foundation that drives the evolutionary process.

47. (A) 1 and 2 only
The Santhals are a major tribal group primarily located in Eastern India, while the Todas are known for their unique pastoral lifestyle in the Nilgiri Hills of the South. However, stating that the Bhils are concentrated in the Himalayan belt is incorrect, as they are actually one of the largest tribal groups in Western and Central India, particularly in Rajasthan.

48. (B) Caucasoid — Flat nose with wide nostrils
In traditional racial classification, the Caucasoid group is typically characterized by narrow noses with high bridges, rather than flat noses with wide nostrils. Flat noses with wide nostrils are more commonly associated with Negroid populations. Mongoloid groups are often identified by the epicanthic fold, while Australoid populations frequently exhibit prominent brow ridges, reflecting different regional evolutionary paths and adaptations.

49. (B) Short-term physiological adjustment to environment.
Acclimatization refers to the short-term physiological adjustments that an individual's body makes in response to changes in the environment, such as moving to a higher altitude or a hotter climate. Unlike genetic adaptation, which occurs over many generations, acclimatization is reversible and occurs within the individual's lifetime. Examples include increased red blood cell production or changes in sweating efficiency.

50. (A) Both A and R are true and R is the correct explanation of A.
Stature is a biological trait that is highly sensitive to environmental conditions during the growth years. Chronic childhood malnutrition can prevent an individual from reaching their full genetic potential for height. This demonstrates how environmental factors like diet and health can suppress the expression of genetic traits, leading to significant stature variation between populations with different levels of resource access.

51. (C) Head shape
The cephalic index is a standard anthropometric measurement used to categorize human head shape. It is calculated as the ratio of the maximum width of the head to its maximum length, multiplied by one hundred. This index allows researchers to classify individuals as dolichocephalic, mesocephalic, or brachycephalic, helping in the study of physical variation and historical population movements.

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18. (A) 1 and 2 only
Melanin is the fundamental pigment determining human skin color, and its distribution is heavily influenced by natural selection. In high-latitude regions with low sunlight, lighter skin was favored to facilitate the synthesis of Vitamin D. However, claiming that diet is the only factor is incorrect, as genetics and ultraviolet radiation exposure are the primary drivers of pigmentation.

19. (C) Larger body sizes to lower surface-area-to-volume ratio.
Bergmann's rule observes that animal populations in colder climates tend to have larger body masses than those in warmer regions. A larger body size results in a lower surface-area-to-volume ratio, which is highly efficient for conserving metabolic heat. This biological adaptation helps humans and other mammals maintain their internal core temperature in freezing environments across the globe.

20. (A) Both A and R are true and R is the correct explanation of A.
Allen's rule posits that animals and humans in hot climates generally possess longer limbs and appendages compared to those in colder areas. These elongated features increase the total body surface area relative to volume, which facilitates more effective heat dissipation through the skin. This physical adaptation is essential for maintaining thermoregulation in environments with high ambient temperatures.

21. (C) Ulotrichous (Woolly)
Ulotrichous hair is characterized by its tight, woolly curls and a flat, elliptical cross-section. This hair form is most commonly found among African populations and is thought to provide an adaptive advantage in hot climates. The structure creates an airy layer above the scalp, which helps in thermoregulation by allowing sweat to evaporate and insulating against direct sunlight.

22. (A) 3-1-2
Hair forms are categorized based on their degree of curliness, typically measured by cross-sectional shape and spiral density. Leiotrichous hair is straight and found largely in Asian populations. Cymotrichous hair exhibits wavy patterns, common in many European and Indian groups. Ulotrichous hair represents the most curled or woolly form, predominantly seen in African and certain Melanesian populations.

23. (D) Both genetic potential and environmental factors.
Human stature is a complex polygenic trait influenced by both an individual's genetic blueprint and their environment. While genetics sets the potential height, environmental factors like nutrition, disease exposure, and overall health during the growth years determine if that potential is reached. Consequently, stature variation serves as a key indicator of the biological well-being of different human populations.

24. (A) Geographic isolation and a distinct cultural identity.
Tribal populations are primarily defined by their relative geographic isolation and the maintenance of a distinct cultural, linguistic, and social identity. They often possess unique traditional knowledge systems and social structures that differentiate them from the mainstream national population. These groups typically maintain a strong connection to their ancestral lands and practice specific subsistence strategies like foraging or horticulture.

25. (A) P-2, Q-3, R-4, S-1
India's tribal populations are distributed across several distinct geographical zones. The North-Northeastern zone includes states like Nagaland, while the Central zone covers Madhya Pradesh and Chhattisgarh. The Southern zone features tribes in Kerala and Tamil Nadu, and the Western zone is represented by groups in Rajasthan and Gujarat. This regional mapping highlights the vast cultural and biological diversity.

26. (A) High frequency of specific genetic markers like Sickle Cell Trait.
Tribal populations in India frequently exhibit unique biological characteristics, such as a high prevalence of the Sickle Cell Trait. This genetic marker often provides an evolutionary advantage in regions where malaria is endemic. Due to their history of endogamy and relative isolation, these groups also maintain distinctive frequencies of various blood groups and other significant biochemical markers.

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rapid transmission of pathogens, often leading to outbreaks of crowd diseases. Additionally, environmental pollution and changes in lifestyle can further challenge the immune systems and overall health of individuals living in densely populated urban centers.

61. (C) Recombination (Crossing over)
Recombination, or crossing over, is a vital process during meiosis that generates significant genetic variation in offspring. It involves the exchange of genetic material between homologous chromosomes, resulting in new combinations of alleles. This shuffling of genes ensures that each individual is genetically unique, providing the raw material for natural selection to act upon and driving the evolutionary process in humans.

62. (D) Urbanization has no impact on the average age of sexual maturity.
It is incorrect to claim that urbanization has no impact on biological development. Research consistently shows that urban environments, with their improved nutrition and healthcare, often lead to an earlier average age of sexual maturity. This biological shift is a clear example of how major changes in social and environmental conditions can directly alter the developmental timelines of human populations.

63. (D) 85 and above
The nasal index is used to categorize the width of the nose relative to its length. A value of eighty-five and above classifies a nose as chamaerrhine, which is characterized by a broad shape with wide nostrils. This nasal type is frequently found in populations living in warm, humid climates, where there is less need to warm or humidify the air.

64. (B) Reliance on traditional knowledge and folklore.
Rural populations often maintain a strong reliance on traditional knowledge, folklore, and ancestral wisdom. These cultural elements are passed down through generations and play a central role in their agricultural practices and social life. Unlike the fast-paced and secular nature of urban living, rural culture is frequently characterized by a closer connection to historical traditions and the natural environment.

65. (B) Increased lung capacity in high-altitude groups.
An adaptive trait is a biological characteristic that enhances an organism's survival and reproduction in a specific environment. Increased lung capacity in high-altitude populations is a classic example, as it allows individuals to extract more oxygen from the thin mountain air. This physical change is the result of long-term natural selection acting on populations living in low-oxygen environments for generations.

66. (A) Transitional zone with mixed rural and urban features.
In the context of the rural-urban continuum, suburbanization describes the development of transitional zones on the outskirts of major cities. These areas exhibit a mix of rural and urban characteristics, offering more space than city centers while maintaining access to urban services and employment. This process reflects the ongoing physical and social expansion of urban areas into the surrounding countryside.

67. (C) Most human traits vary continuously rather than discretely.
Modern biological research emphasizes that most human traits, such as height, skin color, and intelligence, vary continuously across populations rather than falling into discrete, separate categories. This continuous distribution is due to the complex interaction of multiple genes and environmental factors. This reality challenges the validity of traditional racial classifications, which often attempt to place people into rigid, non-overlapping groups.

68. (D) Many Indian populations (intermediate)
The term mesorrhine refers to a nose of intermediate width, falling between the narrow leptorrhine and broad chamaerrhine types. This nasal form is commonly found in many populations across the Indian subcontinent. Because India is a region of significant historical genetic admixture and diverse environmental zones, its populations often exhibit intermediate physical traits that reflect this complex evolutionary and social history.

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CHAPTER 10
Public Health

1. According to C.E.A. Winslow, public health is the science and art of preventing disease, prolonging life, and promoting health through organized efforts of which of the following?
(A) Individual medical practitioners
(B) Community members
(C) Private corporate hospitals
(D) Pharmaceutical industries

2. Arrange the following levels of health care intervention in the chronological order of their application to a patient's journey, starting from a healthy state:
1. Tertiary prevention
2. Primary prevention
3. Secondary prevention

(A) 1-2-3
(B) 2-1-3
(C) 2-3-1
(D) 3-2-1

3. Which of the following is a primary focus of individual/clinical health that distinguishes it from public health?
(A) Systemic focus on the community as a whole
(B) Primary emphasis on disease prevention
(C) Diagnosis and treatment of the individual
(D) Regular monitoring of population health trends

4. Consider the following statements regarding community and public health:
Statement I: Community health focuses on the health of a defined group of people or a specific locality.
Statement II: Public health is a broader term that encompasses organized efforts at the state or national level.
Which of the above statements is/are correct?
(A) Statement I is correct, but Statement II is incorrect.
(B) Statement II is correct, but Statement I is incorrect.
(C) Both Statement I and Statement II are correct.
(D) Neither Statement I nor Statement II is correct.

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5. The following elements are associated with Winslow's definition of Public Health:
1. Improving sanitation of the environment.
2. Control of community infections.
3. Education of the individual in principles of personal hygiene.

Which of the above statement(s) is/are correct?
(A) 1 and 2 only
(B) 2 and 3 only
(C) 1 and 3 only
(D) 1, 2, and 3

6. Which public health parameter specifically measures the number of deaths in a population?
(A) Morbidity indicators
(B) Mortality indicators
(C) Fertility indicators
(D) Disability indicators

7. Which of the following is NOT classified as a morbidity indicator in public health surveillance?
(A) Incidence rate of tuberculosis in a region
(B) Prevalence of diabetes mellitus in adults
(C) Hospital admission rates for acute cases
(D) Case fatality rate of a viral outbreak

8. The following question consists of an Assertion (A) and a Reason (R). Choose the correct option:
Assertion (A): Life expectancy at birth is considered a key indicator of the socio-economic development of a country.
Reason (R): It reflects the overall mortality experience of all age groups in a population.
(A) Both A and R are true and R is the correct explanation of A.
(B) Both A and R are true but R is not the correct explanation of A.
(C) A is true but R is false.

morphological development of the human skull and dental structure.

78. (D) Phenotype = Genotype + Environment
The phenotype, or the observable characteristics of an individual, is the result of the complex interaction between their genotype and the environment. While the genotype provides the genetic potential, environmental factors like nutrition, climate, and lifestyle determine how those genes are expressed. This fundamental biological principle explains why individuals with similar genetics can still exhibit significant physical and functional differences.

79. (A) Chain of adjacent metropolitan areas.
A megalopolis is a vast urban region formed by the merging of several adjacent metropolitan areas into a continuous developed zone. These areas are characterized by extremely high population densities and complex economic and social infrastructures. The growth of megalopolises reflects the global trend toward massive urbanization and the increasing concentration of human populations in highly interconnected and expansive city systems.

80. (B) Moving from a village in Bihar to Delhi.
Internal migration refers to the movement of people from one region to another within the boundaries of a single country. Moving from a rural village to a major national city is a classic example. This process is a significant driver of social and biological change, as it reshapes population distributions, facilitates genetic admixture, and influences the cultural dynamics within the nation.

81. (B) Increased vulnerability to “crowd diseases”.
Urban populations exhibit a specific biological vulnerability to crowd diseases due to high population density and constant close contact between individuals. These conditions allow infectious pathogens to spread rapidly through the community. While urbanites may have better access to healthcare, the environment itself facilitates the transmission of respiratory and other communicable diseases compared to more sparsely populated rural or tribal areas.

82. (A) Intelligence quotient (IQ)
Earnest Hooton’s criteria for racial classification were focused exclusively on observable physical and morphological traits. These included skin pigmentation, hair form, and eye color variation. He did not use intelligence quotient (IQ) as a criterion, as IQ is a psychological measure rather than a physical or biological trait suitable for morphological classification of human groups based on their external appearance.

83. (C) Todas
The Todas, a pastoral tribal group residing in the Nilgiri Hills of Southern India, are historically famous in anthropological literature for their practice of polyandry. This marriage system, where a woman has multiple husbands, was a unique cultural adaptation to their specific social and environmental conditions. Studying such practices helps anthropologists understand the vast diversity of human kinship and social structures.

84. (D) Race
The concept of the cline was introduced to provide a more scientifically accurate way of describing human variation, effectively replacing the rigid and often biased concept of race. By focusing on the gradual transition of traits across geography, the clinal approach acknowledges that human diversity is continuous. This shift allowed anthropologists to move away from arbitrary categories toward a more fluid understanding.

85. (C) High altitude — Increased red blood cell count
Living at high altitudes presents a major physiological challenge due to low oxygen levels. An increased red blood cell count is a key adaptive response, as it allows the blood to carry more oxygen to the body’s tissues. This biological change can occur as a short-term adjustment or, in some populations, as a permanent genetic adaptation to high-mountain environments.

86. (C) Both statements are correct.
Tribal populations are frequently endogamous, meaning they primarily marry within their own social or ethnic group. This practice has significant biological implications, as it increases the probability of genetic homozygosity. Over generations, this can lead to the concentration

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of specific alleles within the group, resulting in unique genetic profiles and an increased frequency of certain inherited traits or disorders.

87. (D) Secularization and rationalization of life.
Urban culture is often characterized by the secularization and rationalization of daily life. In the diverse and fast-paced environment of a city, people frequently rely more on scientific and logical frameworks rather than traditional religious or supernatural explanations. This cultural shift reflects the complexity of urban social structures and the need for standardized, impersonal rules to manage large, heterogeneous populations.

88. (A) Humans show adaptive ranges of differences.
The study of human variation emphasizes that the biological differences observed between populations are often adaptive responses to different environmental pressures. Rather than justifying concepts of superiority or inferiority, these variations highlight the remarkable flexibility and resilience of the human species. Understanding these adaptive ranges allows scientists to appreciate how humans have successfully colonized nearly every corner of the planet.

89. (C) Seasonal migration for work.
Seasonal migration for employment significantly influences the health profile of rural populations in India. When individuals move temporarily to cities or other agricultural zones for work, they are exposed to different environments, pathogens, and lifestyle stressors. This mobility can impact nutritional status and the spread of diseases, creating a complex health landscape that differs from more stable, non-migratory populations.

90. (A) Skin color is determined by a single gene.
It is incorrect to state that skin color is determined by a single gene. In reality, skin pigmentation is a complex polygenic trait influenced by the interaction of multiple genes at different loci. These genes control the type and amount of melanin produced. This polygenic nature results in the continuous spectrum of skin tones observed across diverse human populations globally.

91. (D) Ultraviolet (UV) rays
The production of melanin in human skin is primarily a biological defense mechanism triggered by exposure to ultraviolet (UV) radiation. Melanin acts as a natural sunscreen, absorbing and scattering harmful UV rays to protect the DNA in skin cells from damage. This process is essential for reducing the risk of skin cancer and preventing the breakdown of essential nutrients like folate.

92. (B) Gene Flow
Gene flow is the primary biological effect of migration, occurring when individuals move between populations and introduce their genetic material into new gene pools. This process increases genetic diversity within the receiving population and can reduce the genetic differences between groups. Gene flow is a major force in evolution, preventing populations from becoming genetically isolated and distinct from one another.

93. (C) Dominance of secondary and tertiary sectors.
Occupational variation in urban areas is characterized by the dominance of the secondary and tertiary economic sectors. These include manufacturing, services, trade, and professional roles. Unlike rural economies centered on agriculture, urban centers offer a vast array of specialized jobs that require different levels of education and skills. This economic diversity is a hallmark of the complex social structure of cities.

94. (D) Albinism
Albinism is a classic example of a discontinuous trait because it involves a clear-cut difference: the presence or absence of pigment. Individuals either have the condition or they do not, with no intermediate forms. This type of variation is typically controlled by a single gene, contrasting with continuous traits like height or skin color that show a wide range of values.

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95. (A) Gloger's Rule — Humid area fauna are darker.
Gloger's rule is a biological principle stating that within a species of endotherms, more heavily pigmented forms tend to be found in more humid environments, such as near the equator. This adaptation may provide protection against UV radiation or help with camouflage.

It is one of several eco-geographical rules used by anthropologists to understand how climate influences the physical variation of species.

96. (B) Malaria-prone environment
The sickle cell trait is a significant biological adaptation found in populations living in regions where malaria is endemic. Individuals carrying one copy of the sickle cell gene have a higher resistance to malaria, providing a clear survival advantage. This is a classic example of balanced polymorphism, where natural selection maintains a potentially harmful allele because it offers protection against a deadly disease.

97. (B) Categories are points on a sliding scale.
The Tribal-Rural-Urban Continuum suggests that these three categories are not isolated or mutually exclusive but rather represent points on a sliding scale of social and biological change. There is constant movement and exchange of culture and genetics between these groups. This framework emphasizes the fluid nature of human societies and the interconnectedness of different populations as they adapt to changing environments.

98. (A) Exposure to zoonotic diseases from livestock.
A distinct biological characteristic of rural populations is their increased exposure to zoonotic diseases, which are infections that jump from animals to humans. Due to their close proximity to livestock and regular involvement in animal husbandry, rural dwellers are more likely to encounter pathogens carried by cattle, poultry, or other domestic animals. This exposure shapes their immune profiles and disease history.

99. (C) William Z. Ripley
William Z. Ripley was a prominent economist and anthropologist famous for his extensive work titled The Races of Europe. In this influential text, he attempted to classify European populations into three main racial groups: Teutonic, Alpine, and Mediterranean. His research focused on cephalic indices and other physical measurements, contributing significantly to the historical study of human variation and regional physical types.

100. (D) "Population" is a more fluid study unit.
Modern biological anthropology utilizes the term population instead of race because it represents a more fluid and scientifically accurate unit of study. Unlike the rigid and historically biased concept of race, populations are defined by breeding patterns and geographic proximity. This approach allows for a better understanding of how genetic diversity shifts over time and space without using arbitrary categories.

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18. The following question consists of an Assertion (A) and a Reason (R). Choose the correct option:
Assertion (A): Social and behavioral sciences are essential components of public health.
Reason (R): Human behavior and social factors significantly influence the spread and prevention of diseases.
(A) Both A and R are true and R is the correct explanation of A.
(B) Both A and R are true but R is not the correct explanation of A.
(C) A is true but R is false.
(D) A is false but R is true.

19. Health administration in public health is primarily concerned with which of the following?
(A) Conducting laboratory experiments for vaccine development
(B) Directly treating patients in the intensive care unit
(C) Management of resources, policies, and health systems
(D) Developing surgical techniques for organ transplant

20. The following features are associated with the Alma Ata Declaration of 1978:
1. Health as a fundamental human right.
2. Primary Health Care as the key to health for all.
3. Focus exclusively on tertiary hospital expansion.

Which of the above statement(s) is/are correct?
(A) 1 and 2 only
(B) 2 and 3 only
(C) 1 and 3 only
(D) 1, 2, and 3

21. Match the Level of Prevention in List I with its Example in List II:
List I: (Level of Prevention)
P. Primary Prevention
Q. Secondary Prevention
R. Tertiary Prevention
S. Primordial Prevention
List II: (Example)
1. Rehabilitation after a stroke
2. Screening for cervical cancer
3. Immunization against Polio
4. Discouraging children from starting smoking

(A) P-3, Q-2, R-1, S-4
(B) P-2, Q-3, R-4, S-1
(C) P-1, Q-4, R-3, S-2
(D) P-4, Q-1, R-2, S-3

22. What is the main goal of secondary prevention in public health?
(A) Preventing the onset of a disease
(B) Early diagnosis and prompt treatment
(C) Reducing the impact of a permanent disability
(D) Eliminating social risk factors

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23. The following question consists of an Assertion (A) and a Reason (R). Choose the correct option:
Assertion (A): The Ottawa Charter of 1986 shifted the focus from simple disease prevention to comprehensive health promotion.
Reason (R): It emphasized that health is created in the settings of everyday life.
(A) Both A and R are true and R is the correct explanation of A.
(B) Both A and R are true but R is not the correct explanation of A.
(C) A is true but R is false.
(D) A is false but R is true.

24. Which of the following is the most appropriate description of "Epidemiology"?
(A) Study of health distribution and determinants in populations
(B) Detailed study of internal structures and systems of human organs
(C) Advanced chemical analysis and formulation of pharmaceutical drugs
(D) Administrative management and logistics of private nursing homes

25. The following terms describe the patterns of disease occurrence:
1. Endemic: Constant presence of a disease in a geographic area.
2. Epidemic: Sudden increase in cases above what is normally expected.
3. Pandemic: An epidemic that has spread over several countries or continents.

Which of the above statement(s) is/are correct?
(A) 1 and 2 only
(B) 2 and 3 only
(C) 1 and 3 only

(D) A is false but R is true.

9. Which indicator measures the number of live births per 1,000 women in the reproductive age group?
(A) Crude Birth Rate
(B) Total Fertility Rate
(C) General Fertility Rate
(D) Gross Reproduction Rate

10. What is the primary difference between public health and clinical medicine regarding their "patient"?
(A) Public health treats the community, while clinical medicine treats the individual.
(B) Clinical medicine treats the environment, while public health treats the individual.
(C) Clinical medicine focuses on prevention, while public health focuses on cure.
(D) Public health focuses on biology, while clinical medicine focuses on sociology.

11. Match the Public Health Parameter in List I with its Definition in List II:
List I: (Public Health Parameter)
P. Infant Mortality Rate
Q. Maternal Mortality Rate
R. Under-5 Mortality Rate
S. Life Expectancy
List II: (Definition)
1. Average number of years a person is expected to live
2. Deaths of children under five per 1,000 live births
3. Deaths of infants under one year per 1,000 live births
4. Deaths of women due to pregnancy-related causes per 1,00,000 live births
(A) P-3, Q-4, R-2, S-1
(B) P-4, Q-3, R-1, S-2
(C) P-1, Q-2, R-3, S-4
(D) P-2, Q-1, R-4, S-3

12. Which of the following statements about Infant Mortality Rate (IMR) is INCORRECT?
(A) It is calculated per 1,000 live births.
(B) It includes only neonatal deaths occurring within 28 days.
(C) It is a sensitive indicator of the availability of health services.
(D) It reflects the nutritional status of the mother and child.

13. Consider the following case study to answer the question:
A public health official is analyzing the sudden increase in new cases of Malaria in a district. Which branch of public health is primarily being utilized?
(A) Biostatistics
(B) Health Administration
(C) Epidemiology
(D) Environmental Health

14. Which indicator is used to express the number of maternal deaths per 1,00,000 live births?
(A) Maternal Mortality Rate
(B) Maternal Death Incidence
(C) Maternal Case Fatality
(D) Maternal Mortality Ratio

15. Identify the significance of the Under-5 Mortality Rate (U5MR) from the following statements:
1. It is a leading indicator of child survival.
2. It reflects the impact of immunization and nutrition programs.
3. It excludes deaths occurring during the first year of life.
Which of the above statement(s) is/are correct?
(A) 1 and 2 only
(B) 2 and 3 only
(C) 1 and 3 only
(D) 1, 2, and 3

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16. Which component of public health involves the application of statistical methods to biological and medical data?
(A) Epidemiology
(B) Biostatistics
(C) Social Science
(D) Health Promotion

17. Which pair is correctly matched regarding the components of public health?
(A) Environmental Health – Mental health counseling
(B) Health Education – Behavior change communication
(C) Biostatistics – Clinical drug manufacturing
(D) Epidemiology – Hospital building design

34. Arrange the following public health milestones in the correct chronological order:
1. Universal Immunization Programme India
2. Alma Ata Declaration
3. Ottawa Charter for Health Promotion

(A) 1-2-3
(B) 2-1-3
(C) 2-3-1
(D) 3-2-1

35. The following are components of the scope of epidemiology:
1. To study the causation of diseases.
2. To provide data for planning and evaluation of health services.
3. To perform clinical surgery on affected patients.

Which of the above statement(s) is/are correct?
(A) 1 and 2 only
(B) 2 and 3 only
(C) 1 and 3 only
(D) 1, 2, and 3

36. Which of the following is an example of tertiary prevention?
(A) Use of condoms to prevent HIV transmission
(B) Conducting regular blood pressure check-ups
(C) Mass fortification of common salt with iodine
(D) Physical therapy for spinal cord injuries

37. What does the "Public" in Public Health primarily refer to?
(A) Government employees only
(B) People living in poverty only
(C) The population as a whole
(D) Patients admitted to private hospitals

38. The following question consists of an Assertion (A) and a Reason (R). Choose the correct option:
Assertion (A): Maternal and Child Health (MCH) is a high-priority area in public health programs.
Reason (R): Mothers and children constitute a vulnerable group and represent a large proportion of the population.
(A) Both A and R are true and R is the correct explanation of A.
(B) Both A and R are true but R is not the correct explanation of A.
(C) A is true but R is false.
(D) A is false but R is true.

39. Occupational health focuses on the relationship between:
(A) Diet and exercise
(B) Genetic factors and disease
(C) Hospital administration and patient billing
(D) Work environment and human health

40. The following actions are associated with Health Promotion according to the Ottawa Charter:
1. Building healthy public policy.
2. Strengthening community action.
3. Developing personal skills.

Which of the above statement(s) is/are correct?
(A) 1 and 2 only
(B) 2 and 3 only
(C) 1 and 3 only
(D) 1, 2, and 3

41. Match the Indicator in List I with its Measurement Goal in List II:
List I: (Indicator)
P. Fertility Indicator
Q. Mortality Indicator
R. Morbidity Indicator
S. Disability Indicator
List II: (Measurement Goal)
1. Burden of sickness in a population
2. Number of deaths in a population
3. Reproductive performance of a population
4. Limitation of movement or function

(A) P-3, Q-2, R-1, S-4
(B) P-2, Q-3, R-4, S-1
(C) P-1, Q-4, R-3, S-2
(D) P-4, Q-1, R-2, S-3

42. Which of the following is an example of an "Epidemic"?
(A) Sudden outbreak of Cholera in a previously unaffected village
(B) Constant number of common cold cases reported in a city annually
(C) Ongoing global presence of various seasonal influenza strains
(D) Specific genetic disorder occurring within a single-family tree

43. The following question consists of an Assertion (A) and a Reason (R). Choose the correct option:

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(D) 1, 2, and 3

26. Which activity is a core part of "Surveillance" in public health?
(A) Systematic collection and analysis of population health data
(B) Clinical treatment of individual patients with specific antibiotics
(C) Strategic marketing and promotion of new health insurance policies
(D) Performance of complex neurosurgeries within a tertiary hospital

27. Which pair is INCORRECTLY matched?
(A) Pandemic – Global spread of COVID-19 virus
(B) Endemic – Goitre in specific Himalayan regions
(C) Vaccination – Level of primary prevention
(D) Epidemic – Isolated case of a common cold

28. The following question consists of an Assertion (A) and a Reason (R). Choose the correct option:
Assertion (A): Vaccination is considered one of the most cost-effective public health tools.
Reason (R): It provides individual immunity and contributes to herd immunity in the population.
(A) Both A and R are true and R is the correct explanation of A.
(B) Both A and R are true but R is not the correct explanation of A.
(C) A is true but R is false.
(D) A is false but R is true.

29. In the context of India's Universal Immunization Programme (UIP), which of the following is true?
(A) It covers only children in urban areas.
(B) It is a private-sector initiative funded by international NGOs.
(C) It was launched to provide free vaccines against life-threatening diseases.
(D) It excludes the vaccine for Tuberculosis (BCG).

30. The National Health Mission (NHM) in India consists of which two major sub-components?
(A) National Surgical Mission and National Medical Mission
(B) National Child Mission and National Elderly Mission
(C) National Clinical Mission and National Lab Mission
(D) National Urban Health Mission and National Rural Health Mission

31. Match the Public Health Component in List I with its Key Function in List II:
List I: (Public Health Component)
P. Environmental Sanitation
Q. Safe Drinking Water
R. Nutrition
S. Occupational Health
List II: (Key Function)
1. Prevention of water-borne diseases like Cholera
2. Disposal of waste and excreta management
3. Addressing malnutrition and micronutrient deficiencies
4. Safety and health of workers in industries
(A) P-2, Q-1, R-3, S-4
(B) P-1, Q-2, R-4, S-3
(C) P-3, Q-4, R-1, S-2
(D) P-4, Q-3, R-2, S-1

32. Which of the following is a primary objective of the National Health Mission (NHM)?
(A) Increasing the cost of medical education
(B) Achieving universal access to equitable health care
(C) Reducing the number of public primary health centers
(D) Promoting the use of expensive imported medicines

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33. Consider the following statements regarding sanitation and health:
Statement I: Environmental sanitation is a key component of public health to prevent infectious diseases.
Statement II: Access to safe drinking water has no significant impact on infant mortality rates.
Which of the above statement(s) is/are correct?
(A) Statement I is correct, but Statement II is incorrect.
(B) Statement II is correct, but Statement I is incorrect.
(C) Both Statement I and Statement II are correct.
(D) Neither Statement I nor Statement II is correct.

69. (C) Random allele frequency changes in small groups.
Genetic drift is an evolutionary mechanism that causes random changes in allele frequencies within a population over time. Its effects are most pronounced in small, isolated groups where chance events can significantly alter the genetic makeup. Unlike natural selection, which is driven by environmental fitness, genetic drift is entirely random and can lead to the loss or fixation of specific alleles.

70. (B) To understand how humans adapt to diverse environments.
Studying human variation is fundamental to anthropology because it reveals how our species has adapted to a vast range of diverse environments across the globe. By analyzing physical and genetic differences, researchers can uncover the evolutionary history of human populations and the selective pressures they faced. This knowledge promotes a scientific understanding of diversity without justifying social or biological inequalities.

71. (D) Higher frequency of rare recessive disorders due to endogamy.
Tribal health is often characterized by a higher frequency of rare recessive genetic disorders. This biological reality is primarily due to the practice of endogamy, or marrying within the same group, which increases the likelihood of individuals inheriting the same recessive alleles from both parents. These health patterns require specialized genetic counseling and public health strategies tailored to specific communities.

72. (A) Khoisan populations of Southern Africa
Steatopygia is a physical trait involving significant fat accumulation on the buttocks and thighs, historically noted in the Khoisan populations of Southern Africa. This trait is more prevalent in females and is thought by some researchers to have served as an adaptive energy reserve during periods of food scarcity. It is one of many specialized physical variations found in specific human groups.

73. (C) Tribal population — Traditional industrialism
Tribal populations are typically identified by their traditional subsistence economies, such as foraging, horticulture, or pastoralism, rather than traditional industrialism. Industrialism is a characteristic of modern urban societies. While rural populations focus on the primary economic sector and migration drives gene flow, the cultural and economic life of tribal groups remains distinct from the large-scale manufacturing processes seen in industrial centers.

74. (A) Dietary habits
Dietary habits are a major source of environmental variation, influencing several physical traits within an individual's lifetime and across generations. For example, nutrition directly impacts stature and overall body mass. While mutation and independent assortment are genetic sources of variation, environmental factors like diet, climate, and lifestyle determine how those genetic potentials are expressed in the actual phenotype of the person.

75. (D) Width of the nose as a percentage of its length.
The nasal index is a key anthropometric measurement calculated by dividing the maximum width of the nose by its maximum length and multiplying the result by one hundred. This index provides a standardized way to compare nasal proportions across different populations. It is a useful tool for studying human adaptation to different climates, as nasal shape is often linked to thermoregulation.

76. (B) Increased sweat efficiency and slender build.
If a population moves from a cold to a tropical climate, natural selection would likely favor traits that facilitate heat loss. This includes increased sweating efficiency and a more slender, elongated build, as predicted by Allen's rule. These adaptations increase the body's surface area relative to its volume, allowing for more effective cooling and helping individuals maintain a stable core temperature.

77. (C) Craniofacial changes due to softer diets.
Urbanization has led to notable craniofacial changes in human populations, primarily due to the transition to softer, highly processed diets. In city environments, the reduced need for heavy chewing can lead to changes in jaw size and the alignment of teeth. This shift reflects how modern lifestyle and dietary choices can influence the

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Assertion (A): Biostatistics helps in determining the effectiveness of a new vaccine.
Reason (R): It allows for the comparison of outcomes between vaccinated and unvaccinated groups using mathematical models.
(A) Both A and R are true and R is the correct explanation of A.
(B) Both A and R are true but R is not the correct explanation of A.
(C) A is true but R is false.
(D) A is false but R is true.

44. Which of the following is a "Negative" indicator of health?
(A) High life expectancy
(B) High infant mortality rate
(C) High literacy rate
(D) High nutritional status

45. The following are primary components of Environmental Health:
1. Safe disposal of human waste.
2. Control of vector-borne diseases (e.g., mosquitoes).
3. Promoting processed junk food.

Which of the above statement(s) is/are correct?
(A) 1 and 2 only
(B) 2 and 3 only
(C) 1 and 3 only
(D) 1, 2, and 3

46. Match the Term in List I with its Description in List II:
List I: (Term)
P. Incidence
Q. Prevalence
R. Endemic
S. Pandemic
List II: (Description)
1. Total number of existing cases (old and new)
2. Number of new cases occurring in a period
3. Disease regularly found among particular people
4. Disease prevalent over a whole country or the world

(A) P-2, Q-1, R-3, S-4
(B) P-1, Q-2, R-4, S-3
(C) P-3, Q-4, R-2, S-1
(D) P-4, Q-3, R-1, S-2

47. Which level of prevention is directed towards the period of pre-pathogenesis (before the disease starts)?
(A) Primary prevention
(B) Secondary prevention
(C) Tertiary prevention
(D) Quaternary prevention

48. The following question consists of an Assertion (A) and a Reason (R). Choose the correct option:
Assertion (A): Safe drinking water is a cornerstone of public health.
Reason (R): Contaminated water is a major vehicle for the transmission of many communicable diseases.
(A) Both A and R are true and R is the correct explanation of A.
(B) Both A and R are true but R is not the correct explanation of A.
(C) A is true but R is false.
(D) A is false but R is true.

49. Nutrition as a public health priority focuses on which of the following?
(A) Commercial sale of expensive protein supplements
(B) Ensuring food security and balanced population diets
(C) Promoting high-end luxury dining in urban centers
(D) Decreasing the overall production of cereal crops

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50. The following features characterize the Universal Immunization Programme (UIP) in India:
1. It aims to reduce mortality and morbidity from vaccine-preventable diseases.
2. It provides vaccines for diseases like Diphtheria, Pertussis, and Tetanus.
3. It is only applicable to children born in government hospitals.

Which of the above statement(s) is/are correct?
(A) 1 and 2 only
(B) 2 and 3 only
(C) 1 and 3 only
(D) 1, 2, and 3

51. Match the Role in List I with the Public Health Discipline in List II:
List I: (Role)

P. Studying disease outbreaks
Q. Designing health education posters
R. Managing a district health office
S. Analyzing population growth data

List II: (Public Health Discipline)
1. Health Education
2. Epidemiology
3. Biostatistics
4. Health Administration

(A) P-2, Q-1, R-4, S-3
(B) P-1, Q-2, R-3, S-4
(C) P-4, Q-3, R-2, S-1
(D) P-3, Q-4, R-1, S-2

52. What is the significance of "Life Expectancy" as a health parameter?
(A) Calculating total financial wealth of an individual person
(B) Counting the total number of hospitals within a large city
(C) Measuring the frequency of advanced surgeries being performed
(D) Reflecting quality of life and health care effectiveness

53. Which of the following is NOT a core component of Primary Health Care as defined in Alma Ata?
(A) Provision of essential drugs
(B) Immunization against major infectious diseases
(C) Compulsory cosmetic surgery for all citizens
(D) Promotion of food supply and proper nutrition

54. Arrange the levels of disease prevention from earliest to latest in terms of disease progression:
1. Early diagnosis and treatment
2. Health promotion and specific protection
3. Disability limitation and rehabilitation

(A) 1-2-3
(B) 2-1-3
(C) 2-3-1
(D) 3-2-1

55. The following are examples of "determinants of health" studied in social and behavioral sciences:
1. Socio-economic status.
2. Cultural beliefs and practices.
3. Genetic factors and inheritance.

Which of the above statement(s) is/are correct?
(A) 1 and 2 only
(B) 2 and 3 only
(C) 1 and 3 only
(D) 1, 2, and 3

56. Which indicator is often used to compare the health status of different countries?
(A) Infant Mortality Rate
(B) Number of ambulances
(C) Number of medical colleges
(D) Total amount of medicine exported

57. Which branch of public health deals with the impact of workplace hazards on health?
(A) Environmental health
(B) Mental health
(C) Occupational health
(D) Geriatric health

58. The following question consists of an Assertion (A) and a Reason (R). Choose the correct option:
Assertion (A): Epidemiology is often called the "basic science of public health."
Reason (R): It provides the methods to investigate causes and distributions of diseases.
(A) Both A and R are true and R is the correct explanation of A.
(B) Both A and R are true but R is not the correct explanation of A.
(C) A is true but R is false.
(D) A is false but R is true.

59. Which of the following is a fertility indicator?
(A) Case Fatality Rate
(B) Prevalence Rate
(C) Incidence Rate
(D) Total Fertility Rate

60. Health education aims to achieve which of the following?
(A) Enforcing strict legal mandates for people to take medicines
(B) Influencing individual and community decisions for health
(C) Increasing the profit margins of private medical clinics
(D) Provision of free surgical tools to all community households

61. Match the Public Health Action in List I with the Type of Indicator in List II:

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List I: (Public Health Action)
P. Counting new Tuberculosis cases
Q. Calculating years of life expected at birth
R. Recording deaths of mothers during childbirth
S. Measuring the number of children born to a woman
List II: (Type of Indicator)
1. Maternal Mortality
2. Morbidity
3. Fertility
4. Life Expectancy
(A) P-2, Q-4, R-1, S-3
(B) P-1, Q-2, R-3, S-4
(C) P-4, Q-3, R-2, S-1
(D) P-3, Q-1, R-4, S-2

62. Which of the following describes a "Pandemic"?
(A) A localized outbreak of food poisoning
(B) A disease always present in a specific valley
(C) A non-communicable disease like hypertension in a family
(D) An infectious disease spreading across multiple continents

63. Which of the following is a primary goal of the National Rural Health Mission (NRHM)?
(A) To provide basic healthcare to the rural population
(B) To build high-tech research labs in metropolitan cities
(C) To encourage people to move to urban areas for treatment
(D) To reduce the number of community health workers

64. Consider the following statements regarding maternal health:
Statement I: Maternal Mortality Ratio (MMR) is calculated per 100,000 live births.
Statement II: MMR is a key indicator of the efficiency of the maternal health care system.
Which of the above statement(s) is/are correct?
(A) Statement I is correct, but Statement II is incorrect.
(B) Statement II is correct, but Statement I is incorrect.
(C) Both Statement I and Statement II are correct.
(D) Neither Statement I nor Statement II is correct.

65. Public health efforts are "organized" which means they are primarily:
(A) Spontaneous and individualistic
(B) Planned and coordinated by societies or governments
(C) Random and accidental
(D) Conducted only by private pharmaceutical firms

66. Which of the following is a tool used for specific protection in primary prevention?
(A) Immunization
(B) Chemotherapy
(C) Surgery
(D) Physical therapy

67. Which of the following is an INCORRECT pair?
(A) Alma Ata Declaration – 1978
(B) Ottawa Charter Focus – 1986
(C) UIP India Launch Date – 1995
(D) National Health Policy – 1983

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68. What does "Morbidity" refer to in public health?
(A) Rate of mortality
(B) Rate of fertility
(C) Mean age at death
(D) State of disease

69. Which of the following is a characteristic of "Endemic" diseases?
(A) Occur in massive and unpredictable global waves
(B) Occur only once in a century in a specific area
(C) Constantly present in a population or region
(D) Always result in immediate death of the host

70. Match the Charter/Declaration in List I with its Primary Focus in List II:
List I: (Charter/Declaration)
P. Alma Ata Declaration
Q. Ottawa Charter
R. Winslow's Definition
S. Universal Immunization Programme
List II: (Primary Focus)
1. Health Promotion
2. Primary Health Care
3. Organized community efforts
4. Vaccine delivery
(A) P-2, Q-1, R-3, S-4

9. (C) General Fertility Rate
The General Fertility Rate is a demographic measure that relates the number of live births to the female population in their reproductive years. By focusing specifically on women aged fifteen to forty-nine, it provides a more accurate reflection of fertility than the crude birth rate. This indicator is crucial for understanding population growth trends and planning comprehensive reproductive health services.

10. (A) Public health treats the community, while clinical medicine treats the individual.
Public health and clinical medicine differ fundamentally in their target of care and intervention strategies. Clinical medicine focuses on diagnosing and healing a single patient through personalized medical care. In contrast, public health views the entire community as its patient, aiming to prevent disease and promote well-being through collective social action. This distinction shapes their respective practices and resource priorities.

11. (A) P-3, Q-4, R-2, S-1
Health parameters are precisely defined to monitor population health status effectively. Infant mortality tracks deaths under one year per thousand births, while maternal mortality focuses on pregnancy-related deaths. Under-five mortality measures childhood survival up to five years of age. Life expectancy provides an estimate of the average lifespan. Correctly identifying these definitions is essential for accurate health data analysis and policy.

12. (B) It includes only neonatal deaths occurring within 28 days.
Infant mortality rate measures the number of deaths of infants under one year of age per thousand live births. It is not limited to neonatal deaths occurring within the first twenty-eight days but encompasses the entire first year of life. This indicator serves as a critical measure of a nation's health care quality, maternal nutrition, and overall living standards globally.

13. (C) Epidemiology
Epidemiology is the cornerstone of public health, focusing on the distribution and determinants of health-related states in populations. When a sudden increase in disease cases occurs, epidemiologists investigate the cause, transmission patterns, and risk factors involved. This scientific approach enables public health officials to implement effective control measures. It is essential for managing outbreaks and preventing future disease spread.

14. (D) Maternal Mortality Ratio
The Maternal Mortality Ratio is the standard metric used to express the risk of death associated with childbirth. It is calculated by dividing the number of maternal deaths by the number of live births in the same period, multiplied by one hundred thousand. This ratio reflects the safety of pregnancy and the quality of obstetric care available to women in society.

15. (A) 1 and 2 only
The under-five mortality rate is a key indicator of child survival and overall social development. It reflects the success of public health programs like immunization, nutrition, and sanitation in reducing childhood deaths. Unlike some other metrics, it includes all deaths occurring from birth up to the age of five. This comprehensive measure helps policymakers evaluate and improve child health interventions.

16. (B) Biostatistics
Biostatistics involves the application of statistical principles and mathematical methods to biological and medical data. It is fundamental in public health for analyzing population trends, interpreting clinical trials, and evaluating health programs. By turning raw data into meaningful information, biostatisticians help officials make evidence-based decisions. This discipline ensures the scientific validity of health-related studies and conclusions for policy.

17. (B) Health Education – Behavior change communication
Health education is a core component of public health that utilizes behavior change communication to influence healthy choices. It aims to empower individuals and communities with knowledge to prevent diseases and promote well-being. This process involves strategic messaging and educational programs designed to modify harmful habits. Effective communication is essential for the successful implementation of various health interventions and strategies.

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(A) Endemic
(B) Sporadic
(C) Epidemic
(D) Pandemic

84. In public health, "detoxification of the environment" falls under which component?
(A) Health Administration
(B) Social Science
(C) Biostatistics
(D) Environmental Health

85. Which organization is primarily responsible for the Alma Ata Declaration?
(A) WTO
(B) World Bank
(C) WHO and UNICEF
(D) UNESCO

86. Which of the following is an example of an INCORRECT pair regarding indicators?
(A) IMR – Deaths under 1 year
(B) U5MR – Deaths under 10 years
(C) MMR – Deaths of women during childbirth
(D) Life Expectancy – Mortality parameter

87. Which of the following is the most appropriate way to improve Public Health in a developing country?
(A) Building only multi-specialty hospitals in cities
(B) Increasing the cost of all medications
(C) Focusing only on tertiary level surgery
(D) Strengthening Primary Health Care and sanitation

88. The following question consists of an Assertion (A) and a Reason (R). Choose the correct option:
Assertion (A): Occupational health programs prevent workplace injuries.
Reason (R): They focus on creating ergonomic and safe working conditions.
(A) Both A and R are true and R is the correct explanation of A.
(B) Both A and R are true but R is not the correct explanation of A.
(C) A is true but R is false.
(D) A is false but R is true.

89. Which of the following is a "fertility" measure?
(A) Prevalence of contraceptive use
(B) Number of hospitals with labor rooms
(C) General Fertility Rate
(D) Maternal Mortality Ratio

90. Which public health component is involved in calculating the "P-value" to test a hypothesis?
(A) Biostatistics
(B) Epidemiology
(C) Health Education
(D) Occupational Health

91. What is the main purpose of "Rehabilitation" in the tertiary level of prevention?
(A) To prevent the disease from ever occurring
(B) To cure the disease in its earliest stages
(C) To vaccinate all the siblings of the patient
(D) Restore individual to optimal functioning

92. Which of the following is a primary focus of the Ottawa Charter?
(A) Clinical trials of new antibiotic drugs
(B) Creating supportive health environments
(C) Building more private medical nursing homes
(D) Increasing the tax rate on all vaccines

93. Which of the following is a core element of safe drinking water programs?
(A) Ensuring water is flavored for the consumer
(B) Ensuring water is only available in plastic bottles
(C) Ensuring water is free from pathogens/ chemicals
(D) Ensuring water is carbonated before distribution

94. Which of the following is a key strategy under the National Health Mission to reduce IMR and MMR?
(A) Encouraging home births without assistance
(B) Reducing the number of midwives
(C) Closing down rural health centers
(D) Promoting institutional deliveries

95. Consider the following statements about Epidemiology:
1. It deals with the study of individuals, not populations.
2. It aims to identify the cause of a disease.
3. It helps in the evaluation of health interventions.

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(B) P-1, Q-2, R-4, S-3
(C) P-3, Q-4, R-2, S-1
(D) P-4, Q-3, R-1, S-2

71. Which component of public health addresses the social determinants like poverty and education?
(A) Biostatistics
(B) Sanitation
(C) Epidemiology
(D) Social Science

72. "Health for All" was the slogan associated with which international conference?
(A) Alma Ata Declaration
(B) Ottawa Charter
(C) Paris Agreement
(D) Tokyo Protocol

73. Which of the following is an example of a mortality indicator?
(A) Incidence of HIV
(B) Prevalence of Obesity
(C) Crude Death Rate
(D) Notification rate of Leprosy

74. Surveillance helps in which of the following?
(A) Early detection of disease outbreaks
(B) Designing clothing for doctors
(C) Decreasing the salary of nurses
(D) Increasing the price of surgical equipment

75. Which level of prevention is represented by screening for breast cancer?
(A) Primary
(B) Tertiary
(C) Primordial
(D) Secondary

76. Which of the following is a component of the National Health Mission?
(A) Skill India Mission
(B) National Urban Health Mission
(C) Digital India Mission
(D) Clean Ganga Mission

77. Which of the following describes the "Science" aspect of Public Health?
(A) Intuition and guesswork
(B) Traditional folk beliefs
(C) Evidence-based research
(D) Marketing and advertising

78. The following question consists of an Assertion (A) and a Reason (R). Choose the correct option:
Assertion (A): Environmental sanitation is crucial for controlling typhoid and cholera.
Reason (R): These diseases are primarily transmitted through the feco-oral route due to poor sanitation.
(A) Both A and R are true and R is the correct explanation of A.
(B) Both A and R are true but R is not the correct explanation of A.
(C) A is true but R is false.
(D) A is false but R is true.

79. Which of the following is a goal of health promotion?
(A) Empowering people to control their health
(B) Increasing the duration of hospital stays
(C) Actively promoting the use of tobacco products
(D) Reducing the total number of parks in cities

80. What is the focus of Maternal and Child Health (MCH) services?
(A) Only mothers residing in major urban centers
(B) Health of women during pregnancy and children
(C) Only teenage children and adolescent groups
(D) Health of elderly grandparents within families

81. Which indicator reflects the number of years a newborn is expected to live if mortality patterns remain constant?
(A) Net Reproduction Rate
(B) Life Expectancy at birth
(C) Age-specific death rate
(D) Case Fatality Ratio

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82. Which of the following is a strategy for secondary prevention?
(A) Sputum examination for Tuberculosis
(B) Health education on diet
(C) Use of artificial limbs
(D) Vaccination for Hepatitis B

83. Which term refers to the sudden and rapid spread of an infectious disease among a large number of people in a specific community?

ANSWERS

1. (B) Community members
Public health focuses on the collective well-being of societies rather than just individual clinical care. Winslow emphasized that health improvement arises through the organized efforts of society. By mobilizing community members and resources, public health aims to prevent diseases and increase life expectancy. This cooperative approach ensures that sanitation and education reach everyone effectively across the entire population.

2. (C) 2-3-1
Health interventions follow a logical sequence starting from a healthy state to disease recovery. Primary prevention occurs first to avert disease onset in healthy individuals. Secondary prevention focuses on early detection and prompt treatment once a condition is present. Finally, tertiary prevention aims at rehabilitation and reducing disability. This progression ensures a comprehensive approach to managing a patient's health journey.

3. (C) Diagnosis and treatment of the individual
Clinical medicine primarily addresses the specific needs of a single patient seeking care for a health condition. It emphasizes the diagnostic process and therapeutic interventions required to cure or manage an ailment. Unlike public health, which targets entire populations, clinical practice centers on the doctor-patient relationship and personalized recovery. This approach ensures targeted medical care for individuals in clinical settings.

4. (C) Both Statement I and Statement II are correct.
Community health specifically targets health outcomes for a defined group or locality, often involving local participation. Public health is a broader field encompassing national or state policies and organized efforts to protect entire populations. Both concepts are integral to the health system, addressing different scales of intervention. They work together to ensure health equity and effective disease prevention strategies.

5. (D) 1, 2, and 3
C.E.A. Winslow defined public health through several core pillars involving organized community efforts. These include maintaining environmental sanitation to prevent disease transmission and controlling infectious outbreaks within the population. Additionally, educating individuals about hygiene principles is essential for promoting personal health. All these elements combined reflect the comprehensive nature of the science and art of preventing disease effectively.

6. (B) Mortality indicators
Mortality indicators are essential tools in public health used to quantify the frequency of deaths within a specific population. These metrics help in understanding the impact of diseases and evaluating the effectiveness of health interventions. By analyzing death rates, health officials can identify priority areas for resource allocation. This data is fundamental for planning and implementing national health policies.

7. (D) Case fatality rate of a viral outbreak
Morbidity indicators measure the frequency and severity of illness or disease within a population, such as incidence and prevalence rates. However, the case fatality rate specifically measures the proportion of deaths among confirmed cases of a disease. This makes it a mortality indicator rather than a morbidity indicator. Understanding this distinction is vital for accurate health surveillance and clinical reporting.

8. (A) Both A and R are true and R is the correct explanation of A.
Life expectancy at birth is a vital metric that summarizes the overall health and mortality conditions across all ages in a country. High life expectancy usually correlates with better nutrition, sanitation, and healthcare access, reflecting advanced socio-economic status. Because it accounts for the entire population's survival experience, it serves as an excellent benchmark for measuring a nation's developmental progress.

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Which of the above statement(s) is/are correct?
(A) 1 and 2 only
(B) 2 and 3 only
(C) 1 and 3 only
(D) 1, 2, and 3

96. Which indicator is calculated as the number of children dying under age five per 1,00,0 live births?
(A) Infant Mortality Rate
(B) Under-5 Mortality Rate
(C) Neonatal Mortality Rate
(D) Perinatal Mortality Rate

97. Which of the following is a benefit of a well-organized health administration?
(A) Widespread waste of essential medical supplies
(B) Efficient delivery of population health services
(C) Creation of confusion in general health policy
(D) Increasing high costs of basic medical treatments

98. Which of the following is an example of an "Environmental Health" intervention?
(A) Chlorination of community water tanks
(B) Teaching a patient how to use an inhaler
(C) Performing a heart bypass surgery
(D) Prescribing glasses for myopia

99. Which of the following best describes "Health Promotion"?
(A) Commercial process of selling private health insurance
(B) Process of diagnosing a rare disease in a laboratory
(C) Enabling people to increase control over their health
(D) Process of building more pharmacies in rural regions

100. Which of the following is the final goal of "Prolonging Life" in Winslow's definition?
(A) Increasing the total number of elderly people in hospitals
(B) Reducing the national birth rate to zero in all regions
(C) Eliminating all medical and health-related professions
(D) Improving life quality and duration via community efforts

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18. (A) Both A and R are true and R is the correct explanation of A.
Social and behavioral sciences are integral to public health because human habits and societal structures directly impact health outcomes. Factors like cultural beliefs, economic status, and social networks determine how diseases spread and how people respond to prevention efforts. By understanding these influences, health professionals can design more effective interventions. This knowledge is crucial for addressing root causes.

19. (C) Management of resources, policies, and health systems.
Health administration focuses on the organizational and managerial aspects of public health systems. It involves planning, coordinating, and overseeing the resources and policies required to deliver health services effectively. By ensuring that health facilities and personnel function efficiently, administrators help achieve broad public health goals. This discipline is vital for the sustainable and equitable operation of the entire healthcare infrastructure.

20. (A) 1 and 2 only
The Alma Ata Declaration of 1978 established health as a fundamental human right and prioritized primary health care. It emphasized that equitable access to basic health services is the key to achieving global health goals. The focus was on community-based care rather than solely on tertiary hospital expansion. This historic agreement shifted the global health agenda toward inclusivity and prevention.

21. (A) P-3, Q-2, R-1, S-4
Prevention strategies range from primordial to tertiary levels depending on the stage of disease progression. Primordial prevention addresses social risk factors like smoking habits. Primary prevention uses immunization to stop disease before it starts. Secondary prevention focuses on early screening for conditions like cancer. Tertiary prevention involves rehabilitation to restore function after an illness. These levels provide a comprehensive framework.

22. (B) Early diagnosis and prompt treatment.
Secondary prevention aims to identify and treat a disease at its earliest possible stage. By using screening tests and clinical examinations, health professionals can detect asymptomatic conditions before they progress or spread. Prompt intervention at this stage helps minimize the severity of the illness and improves the chances of recovery. This strategy is essential for reducing disease duration and complications.

23. (A) Both A and R are true and R is the correct explanation of A.
The Ottawa Charter of 1986 redefined public health by emphasizing health promotion as a comprehensive process. It highlighted that health is influenced by daily environments and social conditions rather than just medical interventions. By advocating for supportive policies and community action, the charter moved beyond simple disease prevention. This approach empowers individuals to take control of and improve health.

24. (A) Study of health distribution and determinants in populations.
Epidemiology is the systematic study of how diseases and health conditions are distributed within specific populations. It investigates the underlying causes, risk factors, and determinants that influence these patterns. This scientific discipline provides the evidence needed to develop and evaluate public health policies and interventions. It is central to understanding why health events occur and how to prevent them effectively.

25. (D) 1, 2, and 3
Public health uses specific terms to describe how diseases spread across regions and time. Endemic refers to a constant baseline presence in an area. An epidemic describes a sudden spike in cases exceeding normal expectations. A pandemic occurs when an epidemic spreads globally across several continents. Accurate classification of these patterns is vital for coordinating effective medical and social responses.

26. (A) Systematic collection and analysis of population health data.
Public health surveillance involves the continuous and systematic gathering, analysis, and interpretation of health-related data. This process is essential for monitoring disease trends, detecting outbreaks early, and evaluating the

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impact of health programs. By providing timely information to decision-makers, surveillance enables a rapid and effective response to health threats. It serves as an early warning system for communities.

27. (D) Epidemic – Isolated case of a common cold.
An epidemic is defined by a significant increase in the number of cases of a disease above what is normally expected in a population. A single, isolated case of a common illness like the cold does not meet this definition. In contrast, pandemics are global, endemics are localized and constant, and vaccination is a proactive primary prevention tool for health.

28. (A) Both A and R are true and R is the correct explanation of A.
Vaccination is highly cost-effective because it prevents expensive illnesses and hospitalizations through simple interventions. By providing individual immunity, it also creates herd immunity, which protects the wider community and limits disease spread. This dual benefit significantly reduces the overall burden on the healthcare system. Consequently, immunization programs are a priority for improving population health and managing resources efficiently.

29. (C) It was launched to provide free vaccines against life-threatening diseases.
India's Universal Immunization Programme is a major government initiative designed to reduce mortality and morbidity from vaccine-preventable diseases. It offers essential vaccines for free to all infants and pregnant women across the country, including rural and urban areas. By targeting conditions like tuberculosis and polio, the program aims to ensure equitable access to life-saving preventive care for everyone.

30. (D) National Urban Health Mission and National Rural Health Mission.
The National Health Mission is India's flagship program aimed at achieving universal health coverage and improving healthcare delivery. It is structured into two main sub-components: the National Rural Health Mission and the National Urban Health Mission. These missions address the unique healthcare challenges of rural and urban populations respectively. This combined approach ensures a comprehensive reach across populations.

31. (A) P-2, Q-1, R-3, S-4
Public health components are designed to address specific environmental and biological risks. Environmental sanitation focuses on waste management, while safe drinking water prevents water-borne infections like cholera. Nutrition programs target malnutrition and essential nutrient deficiencies in the population. Occupational health ensures the safety and well-being of workers in various industrial settings. Each discipline plays a unique health role.

32. (B) Achieving universal access to equitable health care.
The central goal of the National Health Mission is to provide equitable, affordable, and quality healthcare services to all citizens. It focuses on strengthening health infrastructure and human resources to ensure that even marginalized communities have access to essential medical care. By reducing out-of-pocket expenses and improving service delivery, the mission strives to enhance the overall health status.

33. (A) Statement I is correct, but Statement II is incorrect.
Environmental sanitation is fundamental to public health as it effectively controls the spread of many infectious diseases. Access to safe drinking water is directly linked to infant mortality rates, as it prevents deadly diarrheal illnesses. Therefore, improving water quality is a critical intervention for saving young lives. These factors highlight the essential role of environmental management in protecting health.

34. (B) 2-1-3.
Global public health has evolved through key international agreements and national programs. The Alma Ata Declaration in 1978 prioritized primary health care. India subsequently launched the Universal Immunization Programme in 1985 to improve child survival. Soon after, the 1986 Ottawa Charter established a modern framework for health promotion. Following this chronological sequence helps in understanding the historical development of policies.

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35. (A) 1 and 2 only
Epidemiology serves as a vital scientific tool for understanding disease causation and planning health services. It provides the data necessary to evaluate the effectiveness of various medical and social interventions. However, the actual performance of clinical surgery is a medical procedure outside the investigative and analytical scope of epidemiology. This distinction is crucial for understanding the different health system roles.

36. (D) Physical therapy for spinal cord injuries.
Tertiary prevention focuses on rehabilitation and limiting disability after a disease or injury has already occurred. Physical therapy for spinal cord injuries is a classic example, as it aims to restore function and improve the patient's quality of life. This level of care follows the initial treatment phase and is essential for helping individuals adapt to permanent health changes.

37. (C) The population as a whole.
Public health is concerned with the well-being of the entire population rather than specific individuals or economic groups. The term refers to organized efforts that benefit everyone in society, regardless of their background or status. By focusing on the collective health of communities, public health seeks to ensure equity and provide protection from widespread diseases and environmental hazards effectively.

38. (A) Both A and R are true and R is the correct explanation of A.
Maternal and Child Health services are a top priority because mothers and children are particularly vulnerable to health risks. This group represents a significant portion of the total population and is sensitive to nutritional and environmental changes. By investing in their health, societies can ensure better survival rates and long-term development. This focus addresses their specific biological needs.

39. (D) Work environment and human health.
Occupational health examines the intricate relationship between an individual's workplace and their physical and mental well-being. It aims to prevent work-related injuries and illnesses by identifying and mitigating environmental hazards like chemicals, noise, or poor ergonomics. By ensuring safe working conditions, this field protects the health of the workforce and enhances overall productivity within the larger society.

40. (D) 1, 2, and 3
Health promotion as outlined by the Ottawa Charter involves a multi-faceted approach to improving well-being. This includes creating healthy public policies, strengthening community-led actions, and helping individuals develop personal skills for health. These strategies work together to empower people and create environments that support healthy lifestyles. All these components are essential for a comprehensive and effective health promotion strategy.

41. (A) P-3, Q-2, R-1, S-4
Health indicators are specialized metrics used to monitor various aspects of population well-being. Fertility indicators measure reproductive performance, while mortality indicators track the number of deaths. Morbidity indicators assess the overall burden of sickness and disease within a community. Disability indicators focus specifically on the limitation of movement or daily functions. These tools are indispensable for accurate health assessment and planning.

42. (A) Sudden outbreak of Cholera in a previously unaffected village.
An epidemic is characterized by a sudden and rapid increase in the number of disease cases beyond what is normally expected in a specific area. A cholera outbreak in a village where it was not previously present fits this definition perfectly. This contrast with endemic diseases, which are constant, or pandemics, which are global, is essential for effective disease surveillance.

43. (A) Both A and R are true and R is the correct explanation of A.
Biostatistics is essential for determining the efficacy of new vaccines through mathematical analysis. By comparing the outcomes between groups that received the vaccine and those that did not, researchers can calculate the probability that the results are significant. This rigorous statistical approach ensures that medical interventions are safe and effective before they are implemented on a large population scale.

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Measuring birth rates among women determines fertility levels. These indicators collectively provide a comprehensive view of the health status and needs of a population, guiding national policy.

62. (D) An infectious disease spreading across multiple continents.
A pandemic is defined as an epidemic of an infectious disease that has spread across a large region, usually multiple continents or even worldwide. It affects a very high number of people and requires a coordinated global response. This scale distinguishes it from localized outbreaks or endemic diseases that are constantly present. Pandemics represent significant threats to global public health.

63. (A) To provide basic healthcare to the rural population.
The National Rural Health Mission was launched in India to address the significant healthcare gaps in rural areas. Its primary objective is to provide accessible, affordable, and quality basic healthcare to underserved rural populations. By strengthening rural health infrastructure and deploying community health workers, the mission aims to improve maternal and child health outcomes and manage communicable diseases effectively.

64. (C) Both Statement I and Statement II are correct.
The Maternal Mortality Ratio is a vital metric calculated per hundred thousand live births to measure the risk associated with pregnancy. It serves as a powerful indicator of the effectiveness and responsiveness of a country's maternal health care system. Monitoring this ratio helps health officials identify gaps in obstetric services and implement targeted interventions to save women's lives globally.

65. (B) Planned and coordinated by societies or governments.
Public health is characterized by organized efforts, meaning that activities are not random but are systematically planned and coordinated. These efforts are typically led by governments or societal organizations to protect the health of entire populations. This collective approach ensures that resources are used efficiently to address widespread health issues like sanitation, disease control, and health education for everyone.

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66. (A) Immunization.
Within the framework of primary prevention, specific protection refers to measures aimed at preventing the occurrence of a particular disease. Immunization is a primary example, as it provides targeted immunity against specific pathogens like polio or measles. Unlike general health promotion, specific protection provides a direct barrier against certain infections. This proactive tool is essential for reducing the incidence of diseases.

67. (C) UIP India Launch Date – 1995.
The Universal Immunization Programme in India was actually launched in 1985, not 1995. This program was a significant milestone in the country's public health history, aimed at providing essential vaccines to all children. The other milestones, such as the 1978 Alma Ata Declaration and the 1986 Ottawa Charter, are correctly dated and represent major developments in global health policy.

68. (D) State of disease.
In public health, morbidity refers to the condition of being ill or having a specific disease within a population. It encompasses the incidence and prevalence of various health conditions, reflecting the general burden of sickness. Understanding morbidity patterns is essential for health planning and evaluating the impact of medical interventions. This term focuses on the state of illness rather than mortality.

69. (C) Constantly present in a population or region.
Endemic diseases are those that are consistently found in a specific population or geographic area at a baseline level. They do not typically occur in sudden, massive waves but maintain a steady presence over time. Identifying endemic conditions, such as goiter in certain regions, allows public health officials to implement long-term control strategies tailored to the local environmental needs.

70. (A) P-2, Q-1, R-3, S-4
Major health declarations and definitions have shaped modern public health priorities. The Alma Ata Declaration focused on primary health

conditions, nutrition, and medical services. It is a key metric for international comparison.

53. (C) Compulsory cosmetic surgery for all citizens.
Primary health care as defined by the Alma Ata Declaration focuses on essential services that are accessible and affordable to everyone. This includes basic nutrition, immunization, and the provision of essential drugs for common ailments. Cosmetic surgery is a specialized, non-essential procedure that does not fall under the mandate of primary healthcare. The goal is to provide fundamental health protection.

54. (B) 2-1-3.
Disease prevention follows a chronological sequence based on the stage of the health condition. It starts with primary prevention, which includes health promotion and specific protection to avert disease. Secondary prevention follows, focusing on early diagnosis and treatment once a condition is detected. Finally, tertiary prevention involves disability limitation and rehabilitation. This structure ensures a thorough approach to managing health outcomes.

55. (A) 1 and 2 only
Social and behavioral sciences focus on how societal factors like economic status and cultural beliefs influence health outcomes. These determinants shape lifestyle choices and access to healthcare services. While genetic factors are important determinants of individual health, they fall under the domain of biological sciences rather than social and behavioral sciences. Understanding social influences is essential for creating policy.

56. (A) Infant Mortality Rate.
The infant mortality rate is widely regarded as one of the most sensitive indicators of a nation's health and social development. It reflects the quality of prenatal and postnatal care, maternal nutrition, and environmental sanitation. Because it is highly responsive to improvements in basic living standards, it is frequently used to compare the health status and progress globally.

57. (C) Occupational health.
Occupational health is the specific branch of public health dedicated to identifying and managing health risks within the work environment. It focuses on preventing injuries, diseases, and stress-related conditions caused by workplace factors. By implementing safety standards and ergonomic practices, occupational health professionals protect workers' physical and mental well-being. This field is essential for maintaining a healthy national workforce.

58. (A) Both A and R are true and R is the correct explanation of A.
Epidemiology is considered the basic science of public health because it provides the essential methodology for studying health events. It allows researchers to determine how diseases occur, who is affected, and what factors contribute to their spread. This scientific foundation is necessary for developing evidence-based strategies to prevent illness and promote health. Without epidemiological data, health interventions lack direction.

59. (D) Total Fertility Rate.
The total fertility rate is a key demographic indicator that estimates the average number of children a woman would have during her reproductive years. Unlike mortality or morbidity rates, which track deaths and illnesses, fertility indicators measure the reproductive performance of a population. This data is essential for understanding population growth trends and planning for future health and social services.

60. (B) Influencing individual and community decisions for health.
Health education aims to provide people with the knowledge and skills necessary to make informed decisions about their well-being. By using effective communication, it encourages the adoption of healthy behaviors and the abandonment of harmful ones. This process empowers both individuals and communities to take active responsibility for their health outcomes. It is a vital strategy for long-term prevention.

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61. (A) P-2, Q-4, R-1, S-3
Different public health actions correspond to specific types of health indicators. Counting new disease cases provides morbidity data, while calculating expected lifespan yields life expectancy. Recording deaths among mothers during childbirth tracks maternal mortality.

quality healthcare to the entire population. By coordinating various levels of care and health programs, administrators minimize waste and improve access to services. This discipline is fundamental for achieving inclusive national health goals.

98. (A) Chlorination of community water tanks.
Environmental health interventions focus on managing the external physical factors that impact human health. The chlorination of community water tanks is a primary example, as it disinfects the water supply and prevents the spread of water-borne pathogens. Unlike clinical treatments for individuals, this intervention protects the entire community by ensuring that a shared environmental resource is safe for consumption.

99. (C) Enabling people to increase control over their health.
Health promotion is defined as a comprehensive process that enables individuals and communities to take greater control over the determinants of their health. It involves a combination of educational, social, and environmental strategies designed to support healthy lifestyles. By empowering people to make better health choices, health promotion aims to improve overall quality of life and prevent chronic disease.

100. (D) Improving life quality and duration via community efforts.
In Winslow's classic definition, the ultimate goal of prolonging life is achieved through organized community efforts to prevent disease and promote health. This involves not just increasing the number of years lived, but also ensuring a high quality of life throughout that duration. By mobilizing societal resources for sanitation and hygiene, public health aims to create a healthier environment.

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care, while the Ottawa Charter emphasized health promotion. Winslow's classic definition highlighted organized community efforts as central to public health. The Universal Immunization Programme's primary goal is the effective delivery of life-saving vaccines. These pillars form the basis of current strategies.

71. (D) Social Science.
Social science in public health examines how broad factors like poverty, education, and social status impact health outcomes. By studying these determinants, researchers can understand why certain populations are more vulnerable to disease. This knowledge is essential for developing comprehensive policies that address the root causes of health inequities. It moves beyond biological factors to consider the social context.

72. (A) Alma Ata Declaration.
The iconic slogan "Health for All" was the central vision of the 1978 Alma Ata Declaration. This international conference emphasized that every individual should have access to a level of health that allows them to lead a socially and economically productive life. It established primary health care as the fundamental strategy for achieving this ambitious and inclusive global goal.

73. (C) Crude Death Rate.
Mortality indicators are metrics used to measure the frequency of deaths within a population. The Crude Death Rate is a basic mortality indicator that represents the total number of deaths per thousand people in a year. In contrast, incidence and prevalence are morbidity indicators that track cases of illness. Understanding death rates is vital for assessing population survival trends.

74. (A) Early detection of disease outbreaks.
Public health surveillance serves as a critical monitoring tool for identifying new health threats as they emerge. By systematically collecting and analyzing health data, officials can detect unusual patterns or sudden increases in disease cases early. This early warning allows for rapid intervention to contain outbreaks and prevent further spread. It is a fundamental component of effective disease control programs.

75. (D) Secondary.
Screening programs, such as those for breast cancer, are core activities of secondary prevention. The primary goal is to detect the disease at an early, asymptomatic stage when treatment is most effective. By identifying cases early through regular exams or imaging, health systems can significantly improve patient outcomes and survival rates. This level focuses on intervention during the pathogenesis phase.

76. (B) National Urban Health Mission.
The National Health Mission is a comprehensive initiative by the Indian government to improve health services across the country. It includes the National Urban Health Mission, which focuses specifically on the unique health needs of the urban poor and those living in slums. This mission works alongside its rural counterpart to ensure that quality healthcare is accessible geographically.

77. (C) Evidence-based research.
The scientific nature of public health is rooted in evidence-based research and the application of rigorous investigative methods. It relies on data from epidemiology, biostatistics, and other disciplines to understand health patterns and evaluate interventions. This objective approach ensures that public health policies and programs are based on proven facts rather than intuition. It is essential for effective national decision-making.

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78. (A) Both A and R are true and R is the correct explanation of A.
Environmental sanitation is vital for controlling diseases like typhoid and cholera because these pathogens spread through contaminated food and water. Poor management of human waste leads to feco-oral transmission, which is the primary route for these infections. By implementing proper sewage disposal and ensuring water safety, communities can break the cycle of transmission. This highlights direct environmental health links.

79. (A) Empowering people to control their health.
Health promotion is defined as the process of enabling individuals and communities to increase control over and improve their health. It goes beyond treating illness to address the

person.

8. Which factor is considered the most appropriate "Host" factor in the epidemiological triad?
(A) Genetic makeup and nutritional status of the individual.
(B) Atmospheric temperature and humidity in the local environment.
(C) The virulence and infectivity of the specific biological pathogen.
(D) The presence of stagnant water sources in the immediate vicinity.

9. Consider the following statements regarding vector-borne diseases:
1. They require a living organism to transmit the pathogen from one host to another.
2. Mosquitoes, ticks, and flies are common examples of vectors.
3. These diseases cannot be transmitted from animals to humans.
Which of the statements given above are correct?
(A) 1 and 3 only
(B) 2 and 3 only
(C) 1 and 2 only
(D) 1, 2 and 3

10. The following case describes a clinical observation: In a clinical setting, a physician observes a rapid increase in cases of respiratory distress following a dust storm. This most likely indicates which mode of transmission?
(A) Airborne
(B) Waterborne
(C) Foodborne
(D) Vector-borne

11. Read the given statements and select the correct option.
Statement I: Waterborne diseases are frequently caused by the contamination of drinking water with fecal matter.
Statement II: Cholera and Typhoid are classic examples of diseases transmitted through the fecal-oral route via water.
(A) Statement I is correct but Statement II is incorrect.
(B) Statement II is correct but Statement I is incorrect.
(C) Both statements are correct.
(D) Neither statement is correct.

12. Identify the correct pair of disease and its causative agent:
(A) Tuberculosis — Plasmodium falciparum
(B) Typhoid — Salmonella typhi
(C) Malaria — Mycobacterium
(D) Cholera — HIV

13. Read the following statements and select the correct option.
Assertion (A): Zoonotic diseases pose a significant threat to global health security.
Reason (R): These diseases are naturally transmitted from vertebrate animals to humans.
(A) Both A and R are true and R is the correct explanation of A.
(B) Both A and R are true but R is not the correct explanation of A.
(C) A is true but R is false.
(D) A is false but R is true.

14. Which of the following is an INCORRECT pair regarding disease classification?
(A) Cancer — Non-communicable
(B) Down Syndrome — Genetic
(C) HIV/AIDS — Infectious
(D) Dengue — Waterborne

15. Match List I with List II to identify the correct disease for each cause and select the correct answer:
List I: (Disease Category)
P. Bacterium
Q. Virus
R. Protozoa
S. Genetic Abnormality
List II: (Example Disease)
1. Dengue
2. Malaria
3. Tuberculosis
4. Thalassemia
Codes:
(A) P-3, Q-1, R-2, S-4
(B) P-1, Q-2, R-3, S-4
(C) P-3, Q-2, R-1, S-4
(D) P-2, Q-3, R-4, S-1

16. The following case describes an outbreak investigation: A community experiences an outbreak of gastrointestinal illness after a public feast. Investigation reveals the use of unpasteurized milk. This is an example of:

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potential physical and chemical hazards, these programs implement protective measures that safeguard workers' health. Because they focus on preventing accidents before they occur, they are essential for reducing the burden of work-related disabilities and ensuring a healthy workforce across sectors.

89. (C) General Fertility Rate.
The General Fertility Rate is a demographic metric used to measure the reproductive output of a population. It specifically calculates the number of live births relative to the female population in their childbearing years. This provides a clear picture of fertility patterns, which is different from mortality ratios or contraceptive use statistics. This data is vital for planning family welfare.

90. (A) Biostatistics.
Biostatistics is the discipline that applies mathematical and statistical methods to health data, including the calculation of P-values. This value is used to test scientific hypotheses and determine the statistical significance of research findings, such as the effectiveness of a new drug. By providing a rigorous framework for analysis, biostatistics ensures that public health conclusions are based on reliable evidence.

91. (D) Restore individual to optimal functioning.
Rehabilitation is the core objective of tertiary prevention, aimed at individuals who have already experienced a permanent illness or injury. Its primary goal is to restore the person to their highest possible level of physical, mental, and social functioning. By providing therapies and support, rehabilitation helps patients adapt to their condition and lead a productive life despite health limitations.

92. (B) Creating supportive health environments.
The Ottawa Charter for Health Promotion emphasized that health is created within the settings of everyday life. One of its primary strategies is the creation of supportive environments that make healthy choices easier for people. This involves social, economic, and physical changes that promote well-being across the community. This approach shifted the focus from purely clinical solutions to broader action.

93. (C) Ensuring water is free from pathogens/ chemicals.
The fundamental objective of safe drinking water programs is to ensure that water provided to the community is free from harmful microorganisms and toxic chemicals. Contamination-free water is essential for preventing the transmission of water-borne diseases like cholera and dysentery. Public health interventions focus on water treatment and monitoring to maintain these safety standards, which are vital for health.

94. (D) Promoting institutional deliveries.
A key strategy under India's National Health Mission to reduce maternal and infant mortality is the promotion of institutional deliveries. By encouraging women to give birth in healthcare facilities under the supervision of trained medical professionals, the risk of complications during labor is significantly reduced. This approach ensures that emergency obstetric care is available, leading to safer outcomes for mothers.

95. (B) 2 and 3 only
Epidemiology is the study of health and disease in populations rather than individuals. Its primary objectives include identifying the underlying causes of disease and evaluating the effectiveness of various health interventions. By providing a scientific basis for public health action, epidemiology helps in planning and resource allocation. It is a fundamental tool for understanding the distribution of health events in society.

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96. (B) Under-5 Mortality Rate.
The under-five mortality rate is a specific demographic indicator calculated as the number of child deaths occurring before age five per thousand live births. This metric is a sensitive measure of the overall well-being and health status of children in a population. It reflects the cumulative impact of nutritional status, immunization coverage, and sanitation on early childhood survival.

97. (B) Efficient delivery of population health services.
Well-organized health administration is essential for the effective functioning of a country's health system. It ensures that resources, personnel, and policies are managed efficiently to deliver

underlying social and environmental factors that influence well-being. By empowering people with knowledge and creating supportive conditions, health promotion aims to foster long-term healthy lifestyles and prevent the development of chronic disease.

80. (B) Health of women during pregnancy and children.
Maternal and Child Health services focus specifically on the health needs of women throughout pregnancy, childbirth, and the postnatal period. They also address the health and development of infants and young children. This priority area aims to reduce maternal and child mortality and ensure a healthy start for the next generation. These services are essential for overall family well-being.

81. (B) Life Expectancy at birth.
Life expectancy at birth is a statistical measure that predicts the average number of years a newborn is expected to live based on current mortality rates. It serves as a vital indicator of the overall health status and environmental conditions of a population. This metric is sensitive to infant mortality and healthcare quality, making it a key benchmark for development.

82. (A) Sputum examination for Tuberculosis.
Secondary prevention strategies focus on the early detection of disease in individuals who may not yet show obvious symptoms. Performing a sputum examination for tuberculosis is a classic example of this approach. It allows for the early diagnosis and prompt treatment of the infection, which prevents progression and reduces transmission. This level of intervention is critical for managing outbreaks.

83. (C) Epidemic.
An epidemic refers to the sudden and rapid spread of an infectious disease within a specific community or region, affecting many people simultaneously. It represents a significant increase over the normal, expected number of cases for that area. Understanding when an outbreak reaches epidemic proportions is vital for mobilizing emergency health resources and implementing containment measures to protect the larger public.

84. (D) Environmental Health.
Environmental health is the discipline concerned with managing and improving physical surroundings to protect human well-being. Activities like the detoxification of the environment, including air and water purification, fall directly under its scope. By removing harmful pollutants and pathogens from the ecosystem, environmental health interventions prevent a wide range of respiratory, gastrointestinal, and toxicological conditions in the general population.

85. (C) WHO and UNICEF.
The Alma Ata Declaration of 1978 was a landmark event jointly organized by the World Health Organization and the United Nations International Children's Emergency Fund. These two global organizations collaborated to define primary health care as the essential strategy for achieving health for all. Their leadership helped establish a unified international agenda focused on equitable access to basic healthcare services.

86. (B) U5MR – Deaths under 10 years.
The under-five mortality rate is a specific health indicator that measures the number of deaths of children before they reach their fifth birthday. It does not include deaths up to ten years of age. Correctly understanding the age limits for these indicators is essential for accurate health reporting and for comparing child survival rates between different regions or time periods.

87. (D) Strengthening Primary Health Care and sanitation.
For developing countries, the most effective way to improve public health is by strengthening primary health care and improving basic sanitation. These fundamental services address the most common causes of mortality and morbidity, such as infectious diseases and malnutrition. By focusing on prevention and community-based care, nations can achieve significant health gains for the largest population segments.

88. (A) Both A and R are true and R is the correct explanation of A.
Occupational health programs are designed to minimize workplace injuries by creating safe and ergonomic environments. By identifying

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CHAPTER 11
Human Diseases and Health

1. Which of the following best defines a non-infectious disease?
(A) A disease that specifically spreads through the ingestion of contaminated water or food.
(B) A disease not caused by pathogens and not transmissible between individuals.
(C) A disease caused by parasitic pathogens that can be transmitted from person to person.
(D) A disease that only affects vulnerable individuals with a compromised immune system.

2. Identify the correct statement regarding chronic diseases:
(A) They persist for a long period, often for a lifetime.
(B) They generally have a very sudden onset and rapid clinical progression.
(C) They are primarily caused by external bacterial infections from the environment.
(D) They typically resolve within a few days without specialized medical intervention.

3. Read the following statements regarding the epidemiological triad and select the correct option.
Assertion (A): The environment in the epidemiological triad includes physical, biological, and socio-economic factors.
Reason (R): These factors determine the exposure and susceptibility of the host to the agent.
(A) Both A and R are true and R is the correct explanation of A.
(B) Both A and R are true but R is not the correct explanation of A.
(C) A is true but R is false.
(D) A is false but R is true.

4. Which of the following is an INCORRECT statement about communicable diseases?
(A) They are characterized by the presence of a causative infectious agent.
(B) They can be transmitted through direct contact or biological vectors.
(C) They have the potential to cause outbreaks or epidemics in a population.
(D) They are primarily caused by permanent chromosomal mutations.

5. Which term refers to the biological organism, such as a virus or bacterium, that causes a disease?
(A) Vector
(B) Host
(C) Agent
(D) Reservoir

6. Match List I with List II to identify the correct disease for each mode of transmission and select the correct answer using the codes given below:
List I: (Mode of Transmission)
P. Airborne
Q. Waterborne
R. Vector-borne
S. Zoonotic
List II: (Disease)
1. Malaria
2. Tuberculosis
3. Rabies
4. Cholera
Codes:
(A) P-1, Q-2, R-3, S-4
(B) P-2, Q-4, R-1, S-3
(C) P-4, Q-3, R-2, S-1
(D) P-2, Q-1, R-4, S-3

7. Which of the following is NOT an example of indirect disease transmission?
(A) Touching a contaminated surface (fomite) in a public area.
(B) Inhaling droplets from a sneeze while in a crowded room.
(C) Consuming food handled by an infected individual without care.
(D) Direct skin-to-skin contact with an infected

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44. (B) High infant mortality rate.
In public health, indicators that reflect poor health outcomes or systemic failures are considered negative indicators. A high infant mortality rate indicates significant health challenges, such as inadequate maternal care or poor sanitation, within a population. Conversely, high life expectancy and literacy are positive indicators of development. Identifying negative trends is crucial for prioritizing health interventions and allocating resources properly.

45. (A) 1 and 2 only
Environmental health focuses on managing external factors that influence human health, such as waste disposal and vector control. Ensuring the safe management of human excreta prevents the spread of many infectious diseases. Similarly, controlling mosquitoes helps reduce the incidence of malaria and dengue. Promoting processed junk food is not a goal of environmental health and is contrary to nutrition.

46. (A) P-2, Q-1, R-3, S-4
Epidemic terms are precisely defined to track disease patterns. Incidence refers to the number of new cases, while prevalence includes all existing cases. An endemic disease is one that is regularly present in a specific region. A pandemic describes an outbreak that has spread globally across several countries. These distinctions are vital for epidemiologists to communicate the scale of diseases.

47. (A) Primary prevention
Primary prevention occurs during the pre-pathogenesis phase, before any disease process has actually begun in the body. Its goal is to prevent the onset of illness through health promotion and specific protection, such as immunization. By addressing risk factors early, primary prevention reduces the overall incidence of diseases. This proactive approach is the most effective way to maintain population health.

48. (A) Both A and R are true and R is the correct explanation of A.
Safe drinking water is a fundamental requirement for public health because it prevents many communicable diseases. Contaminated water sources are the primary route for transmitting pathogens that cause cholera, typhoid, and various diarrheal illnesses. By ensuring access to clean water, communities can drastically reduce the incidence of these life-threatening conditions. This intervention is a cornerstone of environmental health.

49. (B) Ensuring food security and balanced population diets.
Nutrition in public health is primarily concerned with ensuring that all segments of the population have access to adequate and balanced diets. This involves addressing issues like food security, malnutrition, and micronutrient deficiencies through large-scale programs. By promoting healthy eating patterns and fortifying common foods, public health initiatives aim to improve the general health and development of the community.

50. (A) 1 and 2 only
India's Universal Immunization Programme is designed to protect all children and pregnant women from major vaccine-preventable diseases. It includes vaccines for conditions such as diphtheria, pertussis, and tetanus, and is available throughout the country, not just in government hospitals. The program is a central strategy for reducing childhood mortality and improving the overall health of the nation's youngest citizens.

51. (A) P-2, Q-1, R-4, S-3
Public health requires various specialized disciplines to function effectively. Epidemiology investigates disease outbreaks, while health education focuses on creating communication materials for behavioral change. Health administration involves the management of facilities and policies at various levels. Biostatistics is used for the complex analysis of population and biological data. Each field contributes essential skills to the protection of community health.

52. (D) Reflecting quality of life and health care effectiveness.
Life expectancy is a comprehensive health parameter that reflects the average number of years a person is expected to live. It serves as a vital indicator of the overall quality of life and the efficiency of a country's healthcare system. High life expectancy generally indicates better living

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(A) Airborne transmission
(B) Foodborne transmission
(C) Genetic predisposition
(D) Vector-mediated transmission

17. Which of the following is the primary causative agent of Malaria?
(A) Aedes aegypti
(B) Plasmodium species
(C) Mycobacterium tuberculosis
(D) Vibrio cholerae

18. Consider the following statements regarding Tuberculosis:
1. It is primarily caused by Mycobacterium tuberculosis.
2. It mainly affects the lungs but can affect other parts of the body.
3. It is transmitted through contaminated water sources.

Which of the statements given above are correct?
(A) 1 and 3 only
(B) 1 and 2 only
(C) 2 and 3 only
(D) 1, 2 and 3

19. Which symptom is most characteristically associated with Cholera?
(A) High-grade “step-ladder” fever
(B) Persistent dry cough for three weeks
(C) Profuse “rice-water” stools
(D) Swelling of the lymph nodes

20. Which of the following is an exception to the characteristics of infectious diseases?
(A) They are typically caused by specific biological agents.
(B) They can be successfully transmitted to a susceptible host.
(C) They often have a clearly defined incubation period.
(D) They are passed from parents to offspring through genetic inheritance.

21. Which diagnostic test is most specifically used to confirm Typhoid fever?
(A) Mantoux Test
(B) ELISA
(C) Widal Test
(D) Western Blot

22. Identify the INCORRECT statement about Dengue:
(A) It is caused by a virus transmitted by the Aedes mosquito species.
(B) It is a bacterial infection cured with a course of simple antibiotics.
(C) It often presents with severe joint and muscle pain during the onset.
(D) A drop in blood platelet count is a common clinical feature of the disease.

23. Read the following statements and select the correct option.
Assertion (A): HIV/AIDS has a profound impact on the health of an individual by weakening the immune system.
Reason (R): The virus specifically targets and destroys T-lymphocytes (CD4 cells).
(A) Both A and R are true and R is the correct explanation of A.
(B) Both A and R are true but R is not the correct explanation of A.
(C) A is true but R is false.
(D) A is false but R is true.

24. Match List I with List II to identify the primary mode of transmission for each infectious disease and select the correct answer:
List I: (Infectious Disease)
P. HIV/AIDS
Q. Malaria
R. Tuberculosis
S. Typhoid
List II: (Primary Mode of Transmission)
1. Respiratory droplets
2. Blood and sexual contact
3. Contaminated food/water
4. Female Anopheles mosquito

Codes:
(A) P-2, Q-4, R-1, S-3
(B) P-1, Q-2, R-3, S-4
(C) P-2, Q-1, R-4, S-3
(D) P-4, Q-3, R-2, S-1

25. Which of the following is a non-communicable disease (NCD)?
(A) Malaria
(B) Tuberculosis
(C) Diabetes
(D) Cholera

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(D) Extreme hunger and frequent nocturnal urination.

89. The following case describes a patient's symptoms: A patient shows symptoms of high fever, headache, and abdominal pain, with "rose spots" appearing on the chest. The likely diagnosis is:
(A) Protozoan Malaria
(B) Waterborne Cholera
(C) Bacterial Typhoid
(D) Viral HIV infection

90. Which of the following is a sex-linked recessive disorder?
(A) Colour Blindness
(B) Down syndrome
(C) Thalassemia
(D) Sickle Cell Anaemia

91. Which of the following is an environmental factor that can influence the spread of waterborne diseases?
(A) High genetic diversity within the local population.
(B) Low virulence of the specific infectious pathogen.
(C) Frequent use of antibiotics for unrelated illnesses.
(D) Lack of proper sanitation and sewage systems.

92. Which of the following is an example of a zoonotic disease?
(A) Hypertension
(B) Rabies
(C) Thalassemia
(D) Diabetes

93. Identify the INCORRECT statement regarding Cardiovascular Diseases (CVDs):
(A) They include coronary heart disease and stroke.
(B) They are the leading cause of death globally.
(C) They are primarily caused by infectious bacteria.
(D) Tobacco use and unhealthy diet are major risk factors.

94. In the context of the nutritional transition, the "Double Burden of Malnutrition" refers to:
(A) A person having two different vitamin deficiencies simultaneously.
(B) The presence of both infectious and genetic diseases in a single family.
(C) High healthcare costs for both the patient and the state healthcare system.
(D) The coexistence of undernutrition and overweight/obesity in the same population.

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95. In Sickle Cell Anaemia, which amino acid is substituted by Valine in the beta-globin chain?
(A) Glutamic acid
(B) Glycine
(C) Lysine
(D) Alanine

96. Which of the following is a characteristic of Down Syndrome?
(A) Presence of only one X chromosome.
(B) Retardation and a flat facial profile.
(C) Excessive bleeding from small cuts.
(D) Inability to digest simple glucose.

97. Which of the following is an example of indirect transmission via a vehicle?
(A) A biological mosquito bite.
(B) Drinking contaminated water.
(C) A casual social handshake.
(D) Direct romantic kissing.

98. Which of the following is a common symptom of chronic hypertension?
(A) Often asymptomatic until complications arise.
(B) Immediate severe chest pain and pressure.
(C) Rapid weight gain over a very short period.
(D) High fever and chills with regular intervals.

99. Which of the following is true for Thalassemia?
(A) It is caused by a nutritional deficiency of Vitamin B12.
(B) It is a qualitative defect in hemoglobin (wrong shape).
(C) It is a quantitative defect in hemoglobin (too little).
(D) It is an infectious disease of the internal bone marrow.

100. The concept of "Double Burden of Disease" is most relevant to:
(A) High-income countries with aging

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35. Which chromosomal disorder is characterized by the presence of an extra copy of chromosome 21?
(A) Turner syndrome
(B) Klinefelter syndrome
(C) Down syndrome
(D) Edward syndrome

36. Consider the following statements regarding Haemophilia:
1. It is a sex-linked recessive disorder.
2. It primarily affects the blood's ability to clot.
3. It is more common in females than in males.
Which of the statements given above are correct?
(A) 1 and 2 only
(B) 2 and 3 only
(C) 1 and 3 only
(D) 1, 2 and 3

37. Which genetic disease results from a point mutation in the hemoglobin gene, leading to crescent-shaped red blood cells?
(A) Thalassemia
(B) Colour Blindness
(C) Sickle Cell Anaemia
(D) Down Syndrome

38. Which of the following is a characteristic of Turner Syndrome?
(A) Presence of an extra X chromosome in males.
(B) Absence of one X chromosome in females (45, X).
(C) Three copies of chromosome 18.
(D) Genetic mutation affecting skin pigmentation.

39. Read the following statements and select the correct option.
Assertion (A): Sickle cell anaemia is highly prevalent in certain tribal populations in India.
Reason (R): The sickle cell trait provides a survival advantage against malaria in endemic regions.
(A) Both A and R are true and R is the correct explanation of A.
(B) Both A and R are true but R is not the correct explanation of A.
(C) A is true but R is false.
(D) A is false but R is true.

40. Which of the following is an example of an environmental disease rather than a genetic one?
(A) Minamata disease (Mercury poisoning)
(B) Thalassemia
(C) Colour Blindness
(D) Haemophilia

41. Identify the INCORRECT pair regarding sex-linked disorders:
(A) Colour Blindness — Difficulty distinguishing certain colours.
(B) Haemophilia — Failure of blood coagulation.
(C) Sickle Cell Anaemia — Sex-linked dominant.
(D) Duchenne Muscular Dystrophy — Progressive muscle weakness.

42. Match List I with List II to identify the correct description for each disease type and select the correct answer:
List I: (Disease Type)
P. Acute
Q. Chronic
R. Communicable
S. Environmental
List II: (Description)
1. Long-term health condition
2. Spreads from person to person
3. Rapid onset, short duration
4. Caused by external pollution or toxins
Codes:
(A) P-3, Q-1, R-2, S-4
(B) P-1, Q-3, R-4, S-2
(C) P-3, Q-2, R-1, S-4
(D) P-2, Q-4, R-3, S-1

43. "Double burden of disease" in developing nations refers to:
(A) Dealing with both acute malnutrition and obesity simultaneously.
(B) Having high rates of both infant and maternal mortality levels.
(C) The simultaneous presence of viral and bacterial pathogen outbreaks.
(D) The coexistence of infectious and non-communicable diseases.

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44. Which of the following statements best describes Thalassemia?
(A) A viral infection that aggressively destroys red blood cells.
(B) A genetic disorder reducing functional hemoglobin production.
(C) A nutritional deficiency disease caused by a severe lack of iron.
(D) A chromosomal abnormality specifically involving sex chromosomes.

45. Consider the following statements regarding Cancer:
1. It is characterized by the loss of contact inhibition in cells.
2. Malignant tumors can spread to distant parts of the body (metastasis).
3. It is a strictly communicable disease spread through air.

Which of the statements given above are correct?
(A) 1 and 2 only
(B) 2 and 3 only
(C) 1 and 3 only
(D) 1, 2 and 3

46. Which of the following is a classic symptom of Malaria?
(A) Continuous low-grade fever with a distinct skin rash.
(B) Severe dehydration and painless watery gastrointestinal diarrhea.
(C) Progressive weight loss and chronic cough over several months.
(D) Chills followed by high fever and sweating at regular intervals.

47. Identify the INCORRECT statement regarding host-agent interactions:
(A) All agents are biological organisms like bacteria or viruses.
(B) Resistance is the ability of the host to ward off a pathogen.
(C) Virulence refers to the degree of pathogenicity of an agent.
(D) A carrier is an individual who harbors the agent but shows no symptoms.

48. Arrange the following steps in the typical progression of a vector-borne disease like Malaria in the human host:
1. Multiplication of parasites in liver cells.
2. Injection of sporozoites by mosquito bite.
3. Rupturing of Red Blood Cells and release of toxins.
4. Infection of Red Blood Cells by merozoites.

(A) 2-1-4-3
(B) 1-2-3-4
(C) 2-4-1-3
(D) 4-2-1-3

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49. Which of the following is NOT a characteristic of communicable diseases?
(A) Presence of an infectious agent.
(B) Caused primarily by a single gene mutation.
(C) Ability to be transmitted to others.
(D) Often requires a reservoir or host.

50. Read the given statements and select the correct option.
Statement I: Acute diseases like the common cold have a short duration and usually do not cause long-term health effects.
Statement II: Chronic diseases like heart disease require long-term management and often result from lifestyle factors.
(A) Statement I is correct but Statement II is incorrect.
(B) Statement II is correct but Statement I is incorrect.
(C) Both statements are correct.
(D) Neither statement is correct.

51. Arrange the stages of an infectious disease in chronological order:
1. Incubation period
2. Prodromal period
3. Period of illness
4. Period of convalescence

(A) 1-2-3-4
(B) 2-1-3-4
(C) 4-3-2-1
(D) 1-3-2-4

52. Which of the following is a recessive Mendelian disorder?
(A) Huntington's disease
(B) Polydactyly
(C) Marfan syndrome
(D) Cystic fibrosis

53. Which term describes the study of how often diseases occur in different groups of people and why?
(A) Pathology
(B) Oncology
(C) Epidemiology
(D) Immunology

54. Which of the following is the most appropriate way to prevent waterborne diseases?
(A) Using mosquito nets consistently during the night hours.
(B) Ensuring chlorination and filtration of drinking water.
(C) Avoiding all physical contact with local wild animal species.
(D) Using sunscreens to prevent harmful ultraviolet light exposure.

55. Identify the correct pair of vector and disease:
(A) Anopheles mosquito — Viral Dengue infection
(B) Culex mosquito — Protozoan Malaria infection
(C) Housefly — Bubonic Plague transmission
(D) Aedes mosquito — Chikungunya infection

56. Which of the following is an exception to the category of lifestyle-related non-communicable diseases?
(A) Haemophilia
(B) Obesity
(C) Type 2 Diabetes
(D) Hypertension

57. A person cannot distinguish between red and green colours. This condition is most likely:
(A) An acute environmental infection.
(B) A result of Vitamin A deficiency.
(C) A sex-linked genetic disorder.
(D) A chromosomal trisomy.

58. Which of the following is a primary characteristic of a zoonotic disease?
(A) It is transmitted from animals to humans.
(B) It is primarily found in terrestrial plants.
(C) It is caused by sedentary lifestyles.
(D) It is passed from father to son.

59. In the context of the epidemiological triad, "stagnant water" is a component of:
(A) The Agent
(B) The Host
(C) The Vector
(D) The Environment

60. Which of the following is NOT a mode of direct transmission?
(A) Transplacental transmission (mother to fetus).
(B) Transmission via contaminated surgical instruments.
(C) Droplet infection from coughing (short distance).
(D) Skin-to-skin contact.

61. Which disease is characterized by "Ghon's complex" in the lungs?
(A) Malaria
(B) Cholera
(C) Tuberculosis
(D) Cancer

62. Identify the INCORRECT statement regarding HIV:
(A) It is a retrovirus that contains RNA.
(B) It causes a gradual decrease in the body's immunity.
(C) Sharing razors with an infected person can be a mode of transmission.
(D) It can be spread through saliva during normal conversation.

63. Which of the following is most likely to cause a foodborne disease outbreak?
(A) Improperly stored cooked meat.
(B) Use of mosquito repellent.
(C) High levels of noise pollution.
(D) Genetic mutation in the host.

64. What is the main clinical impact of Sickle Cell Anaemia?
(A) Excessive bleeding from very minor physical wounds.
(B) Reduced oxygen capacity and blood vessel blockage.
(C) Permanent loss of vision due to retinal detachment.
(D) Uncontrolled increase in total white blood cell count.

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26. Identify the correct pair of a lifestyle disease and its primary risk factor:
(A) Diabetes — High intake of processed sugars and sedentary habits
(B) Hypertension — Consistent participation in excessive physical activity
(C) Cancer — Routine administration of an approved preventative vaccination
(D) Cardiovascular disease — Strict adherence to a low sodium dietary plan

27. Consider the following statements regarding HIV transmission:
1. It can be transmitted through sharing infected needles.
2. It can be transmitted from an infected mother to her child during childbirth.
3. It can be transmitted through casual social contact like shaking hands.

Which of the statements given above are correct?
(A) 1 and 3 only
(B) 1 and 2 only
(C) 2 and 3 only
(D) 1, 2 and 3

28. Which condition is characterized by chronically elevated blood glucose levels?
(A) Hypertension
(B) Diabetes Mellitus
(C) Cardiovascular disease
(D) Thalassemia

29. Hypertension is clinically defined as:
(A) Low blood pressure that causes sudden fainting.
(B) Irregular heartbeats caused by internal valve failure.
(C) Consistently high blood pressure against arterial walls.
(D) Obstruction of blood flow specifically to the heart or brain.

30. Read the following statements and select the correct option.
Assertion (A): Cancer is considered a non-communicable disease.
Reason (R): It results from uncontrolled cell division and is not spread through pathogens.
(A) Both A and R are true and R is the correct explanation of A.
(B) Both A and R are true but R is not the correct explanation of A.
(C) A is true but R is false.
(D) A is false but R is true.

31. Which of the following best describes Cardiovascular Diseases (CVD)?
(A) A group of disorders of the heart and blood vessels.
(B) Diseases caused by bacterial infections of the lungs.
(C) Genetic disorders affecting the production of hemoglobin.
(D) Conditions caused by a lack of vitamin C in the diet.

32. Identify the INCORRECT statement regarding Genetic Diseases:
(A) They are caused by abnormalities in an individual's genome.
(B) They are easily cured with a course of antibiotics.
(C) They can be inherited from parents.
(D) They may involve chromosomal or single-gene mutations.

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33. Match List I with List II to identify the type or mechanism for each genetic disorder and select the correct answer:
List I: (Genetic Disorder)
P. Down Syndrome
Q. Haemophilia
R. Sickle Cell Anaemia
S. Turner Syndrome
List II: (Type/Mechanism)
1. Sex-linked recessive
2. Trisomy 21
3. Monosomy (45, X)
4. Autosomal recessive mutation

Codes:
(A) P-1, Q-2, R-3, S-4
(B) P-2, Q-1, R-4, S-3
(C) P-4, Q-3, R-2, S-1
(D) P-2, Q-4, R-1, S-3

34. A Mendelian dominant disorder is one where:
(A) Only one copy of the abnormal gene is sufficient to cause the disease.
(B) Two copies of the abnormal gene are required to express the disease.
(C) The disease only affects male offspring.
(D) The disease skips generations and only

77. The term "Mendelian Disorder" refers to:
(A) Disorders caused by chromosomal non-disjunction.
(B) Disorders caused by external environmental toxins.
(C) Disorders caused by a single gene mutation.
(D) Disorders that are only present at birth.

78. Which of the following is a most appropriate description of Cancer?
(A) A contagious bacterial infection of the somatic tissues.
(B) A nutritional deficiency of iron within the blood.
(C) A chromosomal monosomy occurring in somatic cells.
(D) Uncontrolled growth and spread of abnormal cells.

79. Read the given statements regarding Thalassemia and select the correct option.
Statement I: Thalassemia is an autosomal recessive blood disorder.
Statement II: It results in the abnormal formation of hemoglobin.
(A) Statement I is correct but Statement II is incorrect.
(B) Statement II is correct but Statement I is incorrect.
(C) Both statements are correct.
(D) Neither statement is correct.

80. Identify the INCORRECT pair regarding mode of transmission:
(A) Syphilis — Sexual contact
(B) Malaria — Contaminated water
(C) Common Cold — Droplet infection
(D) Rabies — Animal bite

81. Which of the following is a primary characteristic of communicable diseases?
(A) They are always inherited from biological parents.
(B) They can be spread to a healthy person.
(C) They are only caused by poor lifestyle choices.
(D) They do not require any type of external agent.

82. Which chromosomal disorder is characterized by a "shorter stature and webbed neck" in females?
(A) Turner syndrome
(B) Down syndrome
(C) Klinefelter syndrome
(D) Cri-du-chat syndrome

83. Which of the following is NOT a vector-borne disease?
(A) Dengue
(B) Malaria
(C) Tuberculosis
(D) Filariasis

84. The "Epidemiological Triad" consists of which three components?
(A) Bacteria, Virus, Fungus
(B) Doctor, Patient, Medicine
(C) Acute, Chronic, Genetic
(D) Host, Agent, Environment

85. Which of the following is a dominant Mendelian disorder?
(A) Sickle cell anaemia
(B) Thalassemia
(C) Myotonic dystrophy
(D) Haemophilia

86. Identify the correct statement regarding Diabetes:
(A) Type 1 diabetes is purely lifestyle-driven.
(B) Type 2 diabetes is associated with obesity.
(C) It is a communicable disease spread through air.
(D) It is caused by overproduction of insulin.

87. Which of the following is an example of an airborne disease?
(A) Cholera
(B) Typhoid
(C) Malaria
(D) Tuberculosis

88. Which of the following symptoms is characteristic of Dengue?
(A) High fever and severe "bone-breaking" pain.
(B) Chronic productive cough over many months.
(C) "Rice water" stools from intestinal distress.

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65. Which of the following is a chromosomal disorder affecting only females?
(A) Klinefelter syndrome
(B) Turner syndrome
(C) Down syndrome
(D) Patau syndrome

66. Read the given statements and select the correct option.
Statement I: Non-communicable diseases (NCDs) are often called "silent killers."
Statement II: NCDs like hypertension may show no symptoms until a major complication like a stroke occurs.
(A) Statement I is correct but Statement II is incorrect.
(B) Statement II is correct but Statement I is incorrect.
(C) Both statements are correct.
(D) Neither statement is correct.

67. Which of the following is a major risk factor for Cardiovascular Diseases?
(A) Participation in regular physical exercise.
(B) Consumption of a fiber-rich plant diet.
(C) High intake of saturated and trans-fats.
(D) Daily intake of dietary antioxidants.

68. Identify the correct pair of genetic disorder and its classification:
(A) Down Syndrome — Sex-linked disorder
(B) Colour Blindness — Chromosomal disorder
(C) Turner Syndrome — Autosomal recessive disorder
(D) Thalassemia — Mendelian disorder

69. Which of the following is NOT a communicable disease?
(A) Typhoid
(B) HIV/AIDS
(C) Hypertension
(D) Dengue

70. Which organism is the biological vector for the transmission of the Zika virus?
(A) Female Anopheles mosquito
(B) Aedes aegypti mosquito
(C) Tsetse fly
(D) Sandfly

71. In the epidemiological triad, the "Agent" can be:
(A) Biological organisms such as bacteria or viruses.
(B) Chemical substances such as toxins or allergens.
(C) Physical factors such as radiation or extreme heat.
(D) Any of these biological, chemical, or physical factors.

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72. Which of the following is a characteristic of acute diseases?
(A) Symptoms develop rapidly and last for a short time.
(B) Presence of long incubation periods.
(C) Associated with genetic mutations.
(D) Requires lifelong medication.

73. What is the primary cause of death in AIDS patients?
(A) The HIV virus itself attacking the muscle of the heart.
(B) Excessive production of red blood cells in the marrow.
(C) Opportunistic infections due to total immune failure.
(D) Inherited chromosomal mutations from parental carriers.

74. Identify the INCORRECT statement regarding Malaria:
(A) It is transmitted by the male Anopheles mosquito.
(B) It is caused by a protozoan parasite.
(C) Symptoms include high fever and shivering.
(D) Quinine is a traditional medicine used for its treatment.

75. Which genetic disorder is caused by the inheritance of two recessive alleles for the hemoglobin beta-chain?
(A) Sex-linked Haemophilia
(B) Chromosomal Down Syndrome
(C) Monosomic Turner Syndrome
(D) Sickle Cell Anaemia

76. Which of the following is a waterborne disease?
(A) Malaria
(B) Cholera
(C) Tuberculosis
(D) Cancer

populations.

(B) Isolated tribal populations with no external contact.

(C) Countries with a high prevalence of genetic disorders.

(D) Developing countries in epidemiological transition.

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ANSWERS

1. (B) A disease not caused by pathogens and not transmissible between individuals.
Non-infectious diseases are conditions that do not spread from one person to another through biological agents. These ailments often arise from genetic factors, lifestyle choices, or environmental exposures rather than infections. Unlike communicable diseases, they lack a causative pathogen like bacteria or viruses, making them non-transmissible within a population through direct or indirect contact.

2. (A) They persist for a long period, often for a lifetime.
Chronic diseases are characterized by their long-term nature and slow progression over time. These health conditions typically require ongoing medical attention and can limit activities of daily living. Common examples include diabetes and heart disease, which differ from acute illnesses that resolve quickly. Management focus is usually on controlling symptoms and preventing further complications through lifestyle changes.

3. (A) Both A and R are true and R is the correct explanation of A.
The epidemiological triad is a fundamental model for understanding disease causation through the interaction of an agent, host, and environment. Environmental factors encompass the external surroundings that facilitate the transmission of an infectious agent to a susceptible host. These physical, biological, and socio-economic conditions directly influence the likelihood of exposure and the overall vulnerability of the individual.

4. (D) They are primarily caused by permanent chromosomal mutations.
Communicable diseases are defined by the presence of an infectious biological agent that can be passed between individuals. Transmission occurs through various routes, including direct contact, air droplets, or vectors like insects. While genetic mutations cause hereditary disorders, they are not the primary cause of infectious outbreaks. Instead, pathogens like bacteria and viruses drive the spread of communicable illnesses.

5. (C) Agent
In the context of disease epidemiology, an agent represents the specific factor that must be present for a disease to occur. This includes biological organisms like viruses, bacteria, fungi, or parasites that invade a host. Understanding the characteristics of these agents, such as their virulence and infectivity, is crucial for developing effective public health interventions and treatment strategies.

6. (B) P-2, Q-4, R-1, S-3
Matching diseases with their transmission modes is essential for epidemiology. Tuberculosis is an airborne disease spread through respiratory droplets, while Cholera is primarily waterborne. Malaria is transmitted by biological vectors like mosquitoes, and Rabies is a classic zoonotic disease passed from animals to humans. Correct identification of these pathways allows for targeted prevention efforts such as sanitation and vector control.

7. (D) Direct skin-to-skin contact with an infected person.
Direct transmission involves the immediate transfer of an infectious agent from a reservoir to a susceptible host through physical contact. Examples include touching, kissing, or direct contact with body fluids. Conversely, indirect transmission occurs via contaminated objects, food, or vectors. Direct skin-to-skin contact bypasses these intermediate steps, making it a primary form of direct rather than indirect disease transmission.

8. (A) Genetic makeup and nutritional status of the individual.
In the epidemiological triad, host factors refer to the internal characteristics of an individual that influence their susceptibility or resistance to a disease. These include biological traits such as genetic makeup, age, and nutritional status. Unlike environmental or agent factors, host

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characteristics determine how an individual responds to exposure, playing a vital role in whether an infection successfully progresses.

9. (C) 1 and 2 only
Vector-borne diseases rely on living organisms, such as mosquitoes, ticks, or flies, to transport pathogens between hosts. These vectors act as biological bridges, facilitating the spread of infections like malaria or dengue. While many vector-borne diseases circulate among humans, others can indeed be transmitted from animals to humans, making the claim that they cannot be zoonotic scientifically inaccurate.

10. (A) Airborne
Airborne transmission occurs when infectious agents are carried through the air by dust or respiratory droplets. A rapid increase in respiratory distress following a dust storm strongly suggests that particles in the air were inhaled by the population. This mechanism allows pathogens or irritants to travel significant distances and reach the lungs of multiple hosts simultaneously, causing localized disease outbreaks.

11. (C) Both statements are correct.
Waterborne diseases often originate from the contamination of public or private drinking water supplies with fecal matter. This fecal-oral transmission route allows pathogens to enter the digestive systems of many individuals simultaneously. Cholera and Typhoid are classic examples where contaminated water serves as a vehicle for the bacteria, leading to widespread gastrointestinal illness and necessitating strict sanitation protocols.

12. (B) Typhoid — Salmonella typhi
Accurately identifying the causative agents of diseases is fundamental for effective clinical diagnosis and treatment. Typhoid fever is a bacterial infection caused by Salmonella typhi, which enters the body through contaminated food or water. Other combinations involving parasites like Plasmodium for malaria or bacteria like Mycobacterium for tuberculosis highlight the diverse nature of biological agents that cause significant human illnesses.

13. (A) Both A and R are true and R is the correct explanation of A.
Zoonotic diseases are infections that are naturally transmitted between vertebrate animals and humans. These diseases pose a significant threat to global health security because they can emerge suddenly from animal reservoirs and cause widespread human illness. Factors like increasing human-animal interaction and environmental changes facilitate this transmission, making zoonoses a primary focus for international public health surveillance and prevention.

14. (D) Dengue — Waterborne
Diseases are classified based on their causes and transmission routes to guide prevention. While cancer is non-communicable and Down syndrome is genetic, infectious diseases like HIV/AIDS are spread through biological contact. Dengue is a vector-borne disease transmitted by mosquitoes, not a waterborne one. Waterborne diseases are caused by ingesting contaminated water, whereas dengue requires a biological vector for its spread.

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15. (A) P-3, Q-1, R-2, S-4
Understanding the classification of diseases by their etiology is crucial for medicine. Tuberculosis is caused by bacteria, while Dengue is a viral infection. Malaria originates from protozoan parasites, and Thalassemia is a genetic abnormality affecting hemoglobin production. Correctly matching these causes to their respective diseases ensures that appropriate therapeutic interventions, such as antibiotics or vaccines, are utilized for patient care.

16. (B) Foodborne transmission
Foodborne transmission occurs when pathogens are consumed through contaminated food or beverages. An outbreak following a feast involving unpasteurized milk is a classic example of this mode, as the milk serves as the vehicle for infectious bacteria. Improper handling or lack of heat treatment allows organisms to survive and multiply, leading to gastrointestinal symptoms among those who consumed the item.

17. (B) Plasmodium species
Malaria is a life-threatening disease caused by protozoan parasites belonging to the Plasmodium genus. These parasites are transmitted to

require two copies of the abnormal gene for the disease to manifest in the offspring.

35. (C) Down syndrome
Down syndrome is a chromosomal disorder caused by the presence of an extra copy of chromosome 21, a condition known as trisomy 21. This genetic imbalance affects physical development and cognitive function, often resulting in characteristic facial features and various health challenges. It typically occurs due to a random error in cell division during the formation of reproductive cells or early embryonic development.

36. (A) 1 and 2 only
Haemophilia is a sex-linked recessive disorder that impairs the body's ability to form blood clots. This condition leads to excessive bleeding from even minor injuries and can cause internal bleeding. Because the relevant genes are located on the X chromosome, the disorder is much more common in males, who have only one X chromosome, than in females, who have two.

37. (C) Sickle Cell Anaemia
Sickle Cell Anaemia is a genetic blood disorder caused by a specific point mutation in the gene responsible for hemoglobin production. This mutation results in the formation of abnormal hemoglobin S, which causes red blood cells to become rigid and crescent-shaped. These sickle-shaped cells can block blood flow and reduce oxygen transport, leading to pain, organ damage, and severe chronic anemia.

38. (B) Absence of one X chromosome in females (45, X).
Turner syndrome is a chromosomal condition that affects females when one of the X chromosomes is partially or completely missing. This monosomy, typically denoted as 45,X, results in various physical characteristics such as short stature and webbed neck. Because it involves the sex chromosomes, it also impacts reproductive development, making it a distinct genetic disorder separate from autosomal trisomies or mutations.

39. (A) Both A and R are true and R is the correct explanation of A.
Sickle cell anaemia is highly prevalent in certain regions because individuals carrying a single mutated gene, known as the sickle cell trait, possess a natural resistance to malaria. This evolutionary advantage has allowed the trait to persist in populations where malaria is endemic. While having two copies causes disease, the survival benefit for carriers explains the high frequency of the mutation.

40. (A) Minamata disease (Mercury poisoning)
Environmental diseases are caused by exposure to toxins, pollution, or harmful chemicals in the surroundings rather than genetic mutations. Minamata disease is a classic example resulting from severe mercury poisoning, often through contaminated seafood. Unlike Thalassemia or Haemophilia, which are inherited through DNA, environmental diseases can be prevented by controlling industrial waste and ensuring the safety of food and water sources.

41. (C) Sickle Cell Anaemia — Sex-linked dominant.
Sickle Cell Anaemia is an autosomal recessive disorder, not a sex-linked dominant one. This means it affects both males and females equally and requires two copies of the mutated gene to be expressed. In contrast, conditions like colour blindness and haemophilia are sex-linked, and Duchenne muscular dystrophy involves progressive muscle loss. Correct genetic classification is essential for understanding inheritance patterns within families.

42. (A) P-3, Q-1, R-2, S-4
Categorizing diseases by their duration and cause helps in medical planning. Acute diseases have a rapid onset and short duration, while chronic conditions are long-term. Communicable diseases spread between individuals via pathogens, and environmental diseases are triggered by external toxins or pollution. This classification system allows healthcare providers to differentiate between immediate infectious threats and long-term health challenges requiring sustained care.

43. (D) The coexistence of infectious and non-communicable diseases.
The double burden of disease refers to a situation where a population faces high rates of both infectious diseases and non-communicable diseases simultaneously. This typically occurs in developing nations experiencing rapid lifestyle changes while still struggling with basic

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factors. Diabetes, specifically Type 2, is closely associated with the excessive consumption of processed sugars and a lack of regular physical activity. These behaviors lead to insulin resistance and metabolic imbalance. Addressing these risk factors through dietary changes and exercise is the primary strategy for managing and preventing such conditions.

27. (B) 1 and 2 only
HIV transmission occurs through the exchange of specific bodily fluids, including blood, breast milk, and vaginal secretions. High-risk activities include sharing infected needles and transmission from mother to child during pregnancy or childbirth. However, the virus is not spread through casual social contact like shaking hands, hugging, or sharing food. Public awareness of these facts is crucial for reducing social stigma.

28. (B) Diabetes Mellitus
Diabetes Mellitus is a metabolic disorder characterized by chronic hyperglycemia, where blood glucose levels remain consistently elevated. This condition occurs when the pancreas fails to produce enough insulin or when the body's cells do not respond properly to the hormone. Long-term high glucose can lead to serious damage to the heart, blood vessels, eyes, kidneys, and nerves if left unmanaged.

29. (C) Consistently high blood pressure against arterial walls.
Hypertension is a clinical condition defined by the persistent exertion of high force by the blood against the walls of the arteries. Over time, this increased pressure can damage the blood vessels and lead to severe complications such as heart disease and stroke. It is often called a silent killer because it may not present obvious symptoms despite causing internal physiological damage.

30. (A) Both A and R are true and R is the correct explanation of A.
Cancer is classified as a non-communicable disease because it does not involve an infectious pathogen that can be transmitted between individuals. It arises when normal cells lose their control mechanisms, leading to rapid and uncontrolled cell division. This process results from genetic mutations or environmental damage within the individual's own body, rather than an external infection spreading through the population.

31. (A) A group of disorders of the heart and blood vessels.
Cardiovascular diseases comprise a broad range of disorders affecting the heart and the circulatory system. These include conditions such as coronary heart disease, cerebrovascular disease, and rheumatic heart disease. Major risk factors often involve lifestyle choices like unhealthy diet, tobacco use, and physical inactivity. These diseases are a leading cause of global mortality and require comprehensive management of blood pressure and cholesterol.

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32. (B) They are easily cured with a course of antibiotics.
Genetic diseases result from abnormalities in an individual's DNA, such as chromosomal mutations or single-gene defects. Because these conditions are rooted in the genetic code, they cannot be cured with antibiotics, which are only effective against bacterial infections. While some symptoms can be managed through therapy or medication, the underlying genetic cause remains permanent and can often be passed to offspring.

33. (B) P-2, Q-1, R-4, S-3
Genetic disorders are classified by their inheritance patterns or chromosomal abnormalities. Down Syndrome is caused by trisomy 21, while Haemophilia follows a sex-linked recessive pattern. Sickle Cell Anaemia results from an autosomal recessive mutation affecting hemoglobin, and Turner Syndrome involves a monosomy where one X chromosome is missing. Distinguishing these mechanisms is vital for genetic counseling and predicting the likelihood of inheritance.

34. (A) Only one copy of the abnormal gene is sufficient to cause the disease.
A Mendelian dominant disorder is a type of genetic condition where the presence of just one mutated allele is enough to express the trait or disease. In these cases, an affected individual typically has at least one affected parent. This inheritance pattern differs from recessive disorders, which

humans through the bites of infected female Anopheles mosquitoes. Once inside the host, the parasites multiply in the liver and then infect red blood cells. Identifying Plasmodium as the causative agent is essential for selecting effective antimalarial drugs and preventative treatments.

18. (B) 1 and 2 only
Tuberculosis is a serious bacterial infection caused by Mycobacterium tuberculosis that primarily targets the lungs but can spread to other organs. It is an airborne disease transmitted through respiratory droplets when an infected person coughs or sneezes. Contrary to waterborne transmission, the bacteria remain suspended in the air, making ventilation and masking critical for preventing the spread within a community.

19. (C) Profuse "rice-water" stools
Cholera is an acute diarrheal infection caused by the bacterium Vibrio cholerae. A hallmark clinical symptom is the production of profuse, painless watery stools that resemble rice water. This condition leads to rapid and severe dehydration, which can be fatal if not treated promptly with rehydration therapy. These specific gastrointestinal symptoms distinguish cholera from other causes of fever or chronic cough.

20. (D) They are passed from parents to offspring through genetic inheritance.
Infectious diseases are characterized by their origin from biological pathogens like bacteria or viruses and their ability to spread to susceptible hosts. They often feature defined incubation periods during which the agent multiplies. However, they are not defined by genetic inheritance from parents to offspring. Diseases passed through genes are classified as hereditary or genetic disorders, which are inherently non-infectious.

21. (C) Widal Test
The Widal test is a common serological diagnostic tool used to detect the presence of antibodies against the Salmonella bacteria that cause Typhoid fever. By measuring the agglutination of bacterial antigens, clinicians can confirm an infection in patients exhibiting symptoms like prolonged fever. While other tests like ELISA or Mantoux are used for different conditions, the Widal remains specific to Typhoid.

22. (B) It is a bacterial infection cured with a course of simple antibiotics.
Dengue is a viral disease, not a bacterial one, meaning it cannot be cured with antibiotics. It is transmitted by Aedes mosquitoes and typically presents with high fever, severe joint pain, and a significant drop in blood platelet counts. Management focuses on supportive care and hydration because antiviral treatments are limited. Misidentifying it as a bacterial infection can lead to inappropriate medical treatment.

23. (A) Both A and R are true and R is the correct explanation of A.
HIV/AIDS severely compromises human health by attacking the very system meant to protect the body. The Human Immunodeficiency Virus specifically targets and destroys T-lymphocytes, also known as CD4 cells, which are vital for coordinating the immune response. As these cells are depleted, the body becomes highly vulnerable to opportunistic infections and cancers, leading to the clinical stage known as AIDS.

24. (A) P-2, Q-4, R-1, S-3
Infectious diseases spread through distinct primary routes that determine prevention strategies. HIV/AIDS is transmitted via blood and sexual contact, whereas Malaria requires the female Anopheles mosquito vector. Tuberculosis spreads through respiratory droplets in the air, and Typhoid is contracted through contaminated food or water. Understanding these specific pathways is essential for implementing effective public health measures like vaccination and sanitation.

25. (C) Diabetes
Non-communicable diseases are health conditions that are not caused by infectious agents and cannot be transmitted from person to person. Diabetes is a prime example, as it results from the body's inability to produce or use insulin effectively, often influenced by genetics and lifestyle. Unlike malaria, tuberculosis, or cholera, diabetes does not involve a pathogen and cannot spread through social contact.

26. (A) Diabetes — High intake of processed sugars and sedentary habits
Lifestyle diseases are strongly linked to an individual's daily habits and environmental

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sanitation and hygiene. Managing both acute infections and chronic conditions like diabetes places a significant strain on the limited resources of national healthcare systems.

44. (B) A genetic disorder reducing functional hemoglobin production.
Thalassemia is a hereditary blood disorder characterized by a quantitative defect in the synthesis of hemoglobin chains. This genetic mutation leads to the production of fewer healthy red blood cells and less functional hemoglobin, resulting in anemia. Unlike nutritional deficiencies, Thalassemia is inherited from parents and often requires regular blood transfusions or other medical treatments to manage the resulting chronic health issues.

45. (A) 1 and 2 only
Cancer is characterized by abnormal cells that have lost contact inhibition, allowing them to divide uncontrollably. Malignant tumors have the dangerous ability to undergo metastasis, where cells spread through the blood or lymph to distant organs. Although it is a major health threat, cancer is a non-communicable disease and cannot be spread through the air or social contact between individuals.

46. (D) Chills followed by high fever and sweating at regular intervals.
Malaria presents with a characteristic cycle of symptoms caused by the synchronous rupturing of red blood cells by parasites. Patients typically experience intense shivering and chills, followed by high fever and profuse sweating. These paroxysms occur at regular intervals depending on the specific Plasmodium species involved. This cyclical pattern is a key clinical indicator used by physicians to distinguish malaria from other fevers.

47. (A) All agents are biological organisms like bacteria or viruses.
In epidemiology, an agent is the factor whose presence or absence is essential for the occurrence of a disease. While biological pathogens like bacteria and viruses are common agents, they are not the only type. Chemical toxins, physical factors like radiation, and nutritional deficiencies also act as agents of disease. Recognizing the broad nature of agents is necessary for understanding non-infectious conditions.

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48. (A) 2-1-4-3
The progression of malaria begins when an infected mosquito injects sporozoites into a human host. These parasites first travel to the liver to multiply before entering the bloodstream as merozoites to infect red blood cells. The subsequent rupturing of these cells releases toxins and new parasites, causing the characteristic fever. This sequential biological process explains the clinical timing and symptoms of the disease.

49. (B) Caused primarily by a single gene mutation.
Communicable diseases are defined by the presence of an infectious agent that can be transmitted from a reservoir to a host. They typically require a biological pathogen and often involve a clearly defined transmission cycle. In contrast, diseases caused primarily by single gene mutations are classified as genetic or Mendelian disorders. These hereditary conditions are non-infectious and cannot be spread through environmental contact.

50. (C) Both statements are correct.
Acute diseases like the common cold are characterized by a rapid onset and short duration, typically ending in full recovery without long-term damage. Conversely, chronic diseases like heart disease persist for long periods and often require permanent lifestyle management. Both types represent different challenges for healthcare, with acute illnesses focusing on immediate relief and chronic conditions requiring sustained, long-term therapeutic interventions.

51. (A) 1-2-3-4
The progression of an infectious disease follows a standard chronological sequence. It begins with the incubation period after exposure, followed by the prodromal period where general symptoms appear. The period of illness is when specific symptoms are most severe, and the process concludes with the period of convalescence as the body recovers. Understanding these stages is vital for determining when a patient is most infectious.

lungs of an infected person and inhaled by others nearby. This mode of transmission makes the disease highly contagious in crowded or poorly ventilated environments, unlike waterborne cholera or vector-borne malaria infections.

88. (A) High fever and severe "bone-breaking" pain.
Dengue fever is a viral infection characterized by a sudden onset of high fever and excruciating pain in the joints and muscles, often described as bone-breaking pain. Other common symptoms include severe headache and a skin rash. These distinct clinical features, along with a potential drop in blood platelets, help clinicians identify dengue and distinguish it from other common febrile illnesses.

89. (C) Bacterial Typhoid
Typhoid fever is a bacterial infection that presents with a characteristic set of symptoms, including sustained high fever, headache, and abdominal pain. A specific clinical sign is the appearance of "rose spots," which are small, faint pink macules on the chest or abdomen. Identifying these symptoms is critical for a timely diagnosis and the initiation of appropriate antibiotic treatment for the patient.

90. (A) Colour Blindness
Colour blindness is a sex-linked recessive disorder, meaning the genes responsible for it are located on the X chromosome. Males are much more frequently affected because they have only one X chromosome; a single mutated gene will cause the condition. Females, with two X chromosomes, must inherit two mutated genes to express it. This inheritance pattern distinguishes it from autosomal recessive disorders like thalassemia.

91. (D) Lack of proper sanitation and sewage systems.
Environmental factors play a major role in the prevalence of waterborne diseases. The lack of proper sanitation and sewage systems allows fecal matter to contaminate local water sources used for drinking and bathing. This provides a direct pathway for pathogens to enter the human population. Improving infrastructure and ensuring waste management are essential environmental interventions for reducing the burden of these gastrointestinal infections.

92. (B) Rabies
Rabies is a viral zoonotic disease that is almost always fatal once clinical symptoms appear. It is transmitted to humans through the bite or scratch of an infected animal, most commonly dogs or bats. The virus attacks the central nervous system, leading to severe neurological symptoms. Because it originates in animal populations and jumps to humans, it is a primary example of zoonotic transmission.

93. (C) They are primarily caused by infectious bacteria.
Cardiovascular diseases are non-communicable conditions primarily caused by lifestyle and genetic factors rather than infectious agents. Key risk factors include tobacco use, unhealthy diet, physical inactivity, and harmful use of alcohol. These factors lead to hypertension and high cholesterol, which damage the heart and blood vessels. While some infections can affect the heart, the global burden of CVD is driven by metabolic risks.

94. (D) The coexistence of undernutrition and overweight/obesity in the same population.
The double burden of malnutrition occurs when a society faces the simultaneous challenges of undernutrition, such as stunting or wasting, and overweight or obesity. This phenomenon is common in developing countries where rapid nutritional transitions lead to high-calorie but nutrient-poor diets. It creates a complex public health challenge, as healthcare systems must address both deficiency-related illnesses and chronic diseases related to excessive weight.

95. (A) Glutamic acid
Sickle Cell Anaemia is caused by a specific point mutation in the DNA sequence of the beta-globin gene. This genetic change results in the replacement of the amino acid glutamic acid with valine at the sixth position of the beta-globin chain. This single substitution radically alters the properties of hemoglobin, causing it to polymerize under low oxygen and distort red blood cells.

96. (B) Retardation and a flat facial profile.
Down syndrome is a chromosomal disorder characterized by a range of physical and cognitive symptoms. Common features include intellectual

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for infection control protocols in medical settings, where sterilization of instruments prevents the spread of pathogens.

61. (C) Tuberculosis
Ghon's complex is a classic pathological feature observed in the lungs of individuals with primary tuberculosis. it consists of a calcified focus of infection and an associated involved lymph node. These lesions are visible on chest X-rays and indicate the body's immune response to Mycobacterium tuberculosis. Identifying such clinical signs is essential for diagnosing tuberculosis and distinguishing it from other chronic respiratory conditions.

62. (D) It can be spread through saliva during normal conversation.
HIV is a retrovirus that is transmitted through specific bodily fluids such as blood, semen, and breast milk. It is not spread through casual social contact, including talking, shaking hands, or sharing saliva during normal conversation. Misconceptions about how the virus spreads can lead to unnecessary fear and discrimination against infected individuals, making accurate public health education about transmission routes extremely important.

63. (A) Improperly stored cooked meat.
Foodborne disease outbreaks are frequently caused by the consumption of food that has been contaminated with pathogenic bacteria or toxins. Improperly stored cooked meat provides an ideal environment for bacteria to multiply rapidly, especially if kept at room temperature. When such food is consumed, it can lead to acute gastrointestinal illness among a large group of people, highlighting the importance of food safety.

64. (B) Reduced oxygen capacity and blood vessel blockage.
Sickle cell anaemia causes red blood cells to become rigid and crescent-shaped, which significantly impairs their ability to carry oxygen. These abnormal cells can also get stuck in small blood vessels, blocking blood flow to various tissues and organs. This leads to painful crises, increased risk of infection, and long-term organ damage, defining the primary clinical impact of this severe genetic disorder.

65. (B) Turner syndrome
Turner syndrome is a chromosomal disorder that occurs exclusively in females. It is characterized by the complete or partial absence of one of the two X chromosomes. This genetic condition leads to specific physical traits and developmental issues that do not occur in males. Unlike Down syndrome, which can affect both sexes, Turner syndrome is inherently linked to the female chromosomal configuration (45, X).

66. (C) Both statements are correct.
Non-communicable diseases are often referred to as silent killers because they can progress for years without causing noticeable symptoms. Hypertension, for instance, may go undetected until it leads to a catastrophic event like a stroke or heart attack. Regular health screenings are essential for identifying these conditions early, as the lack of visible symptoms often prevents individuals from seeking necessary medical care.

67. (C) High intake of saturated and trans-fats.
Diet plays a critical role in the development of cardiovascular diseases. A high intake of saturated and trans-fats contributes to elevated cholesterol levels and the buildup of plaque in the arteries, a process known as atherosclerosis. This increases the risk of heart attacks and strokes. Conversely, fiber-rich diets and regular exercise serve as protective factors that help maintain cardiovascular health and prevent disease.

68. (D) Thalassemia — Mendelian disorder
Genetic disorders are categorized based on their underlying cause. Thalassemia is a Mendelian disorder because it is caused by a mutation in a single gene that follows specific inheritance patterns. In contrast, Down syndrome is a chromosomal disorder involving an extra chromosome, and color blindness is specifically sex-linked. Correctly pairing these disorders with their classifications is fundamental for genetic testing and family planning.

69. (C) Hypertension
Hypertension is a non-communicable disease characterized by chronically high blood pressure. Unlike typhoid, HIV/AIDS, and dengue, it is not caused by a biological pathogen and cannot be transmitted from one person to another through contact or vectors. It is primarily influenced by

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a combination of genetic factors and lifestyle choices, making it a chronic condition rather than an infectious one.

70. (B) Aedes aegypti mosquito
The Zika virus is primarily transmitted to humans through the bite of an infected Aedes aegypti mosquito. This same vector is also responsible for spreading other viral diseases like dengue and yellow fever. Controlling the population of these mosquitoes through the elimination of standing water and the use of insecticides is a primary strategy for preventing outbreaks of these vector-borne viral infections.

71. (D) Any of these biological, chemical, or physical factors.
In the epidemiological triad, the agent is any factor whose presence or absence is necessary for a disease to develop. This broad category includes biological pathogens like viruses, chemical substances such as environmental toxins, and physical factors like extreme heat or radiation. Recognizing that agents can be non-living is essential for understanding the diverse causes of both infectious and non-communicable health conditions.

72. (A) Symptoms develop rapidly and last for a short time.
Acute diseases are characterized by a sudden onset of symptoms that typically resolve within a short period, ranging from a few days to a few weeks. Common examples include the flu or the common cold. These illnesses differ from chronic diseases, which have long incubation periods and persist for years. Most acute conditions end in a full recovery through the body's immune response.

73. (C) Opportunistic infections due to total immune failure.
HIV/AIDS does not kill patients directly; instead, it progressively destroys the immune system by attacking CD4 cells. This leads to a state of total immune failure where the body can no longer defend itself against common pathogens. Consequently, patients succumb to opportunistic infections like pneumonia or tuberculosis, or certain cancers, which their weakened immune systems are unable to combat effectively.

74. (A) It is transmitted by the male Anopheles mosquito.
Malaria is transmitted exclusively by the female Anopheles mosquito because only the females bite to obtain a blood meal for egg production. Male mosquitoes feed on nectar and do not transmit the Plasmodium parasite. Understanding this specific biological detail is crucial for vector control programs, which focus on the behaviors and breeding habits of the female mosquitoes to reduce the transmission of malaria.

75. (D) Sickle Cell Anaemia
Sickle cell anaemia is an autosomal recessive genetic disorder caused by inheriting two copies of a mutated gene. This mutation specifically affects the beta-globin chain of hemoglobin, altering its structure under low oxygen conditions. Since both alleles must be abnormal for the disease to manifest, it is classified as a recessive Mendelian condition. This inheritance pattern ensures the disease affects both sexes equally.

76. (B) Cholera
Waterborne diseases are caused by pathogens that are transmitted through contaminated water. Cholera is a prominent example, spreading when people ingest water or food contaminated with the Vibrio cholerae bacterium. This often occurs in areas with poor sanitation and inadequate water treatment. Unlike vector-borne malaria or airborne tuberculosis, the primary prevention for cholera is ensuring access to clean and safe drinking water supplies.

77. (C) Disorders caused by a single gene mutation.
A Mendelian disorder is a genetic condition caused by a mutation in a single gene. These disorders follow the principles of inheritance described by Gregor Mendel, such as autosomal dominant, autosomal recessive, or sex-linked patterns. This classification distinguishes them from chromosomal disorders, which involve changes in the number or structure of entire chromosomes, and from complex diseases influenced by multiple genes and environment.

78. (D) Uncontrolled growth and spread of abnormal cells.
Cancer is a broad term for a group of diseases characterized by the uncontrolled division of abnormal cells. These cells can invade nearby

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tissues and spread to other parts of the body through the blood and lymph systems. This process, driven by genetic mutations within the individual's cells, leads to the formation of tumors and disrupts normal physiological functions, making it a non-communicable disease.

79. (C) Both statements are correct.
Thalassemia is a hereditary blood disorder inherited in an autosomal recessive manner. It results from genetic mutations that cause the abnormal formation or reduced production of hemoglobin chains. This leads to the destruction of red blood cells and chronic anemia. Because it is a single-gene disorder, it is classified as a Mendelian condition that requires both parents to carry the gene for offspring to be affected.

80. (B) Malaria — Contaminated water
In epidemiology, diseases are classified by their primary mode of transmission to identify effective control measures. While Syphilis spreads through sexual contact and the Common Cold via droplets, Malaria is specifically transmitted through the bite of an infected female Anopheles mosquito. Mislabeling it as waterborne overlooks the critical role of biological vectors in its lifecycle, which is distinct from diseases like cholera.

81. (B) They can be spread to a healthy person.
The defining characteristic of a communicable disease is its ability to be transmitted from an infected reservoir to a healthy, susceptible host. This transmission can occur through direct physical contact, respiratory droplets, contaminated food and water, or biological vectors. Unlike non-communicable diseases, which are tied to genetics or lifestyle, communicable illnesses involve an infectious agent that can move through a population.

82. (A) Turner syndrome
Turner syndrome is a chromosomal disorder in females characterized by a missing or partially missing X chromosome. Common clinical features include shorter stature, delayed puberty, and a webbed neck. Because it is a chromosomal monosomy (45, X), it affects the overall development and reproductive system of the individual. This specific set of physical symptoms distinguishes Turner syndrome from other chromosomal abnormalities like Down or Klinefelter syndromes.

83. (C) Tuberculosis
Vector-borne diseases like dengue, malaria, and filariasis require a living organism, such as a mosquito or fly, to transmit the pathogen between hosts. Tuberculosis, however, is an airborne disease caused by bacteria that spread through respiratory droplets when an infected person coughs or sneezes. It does not require an insect or animal vector for its transmission, making its prevention strategies very different.

84. (D) Host, Agent, Environment
The epidemiological triad is a fundamental model used to explain the causes of infectious diseases. It consists of three essential components: the host, which is the individual affected; the agent, which is the pathogen causing the disease; and the environment, which includes the external factors that allow transmission. The interaction between these three elements determines whether a disease will occur in a population.

85. (C) Myotonic dystrophy
Mendelian disorders are classified as dominant when only one copy of a mutated gene is needed to cause the disease. Myotonic dystrophy is an example of such a disorder, where an affected parent has a fifty percent chance of passing it to each child. In contrast, sickle cell anaemia and thalassemia are recessive, requiring two mutated genes, and haemophilia is a sex-linked recessive condition.

86. (B) Type 2 diabetes is associated with obesity.
Diabetes is a chronic non-communicable disease related to insulin function. Type 2 diabetes is specifically linked to lifestyle factors, with obesity being a primary risk factor due to its role in causing insulin resistance. While Type 1 is often autoimmune, Type 2 is largely preventable and manageable through weight control, healthy diet, and regular physical activity. It is not an infectious disease spread through contact.

87. (D) Tuberculosis
Airborne diseases are transmitted when infectious agents remain suspended in the air within small droplets or dust particles. Tuberculosis is a classic example, as the bacteria are expelled from the

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52. (D) Cystic fibrosis
Cystic fibrosis is a classic example of a recessive Mendelian disorder. It occurs when an individual inherits two copies of a mutated gene, one from each parent. This condition affects the production of mucus and sweat, leading to severe damage to the lungs and digestive system. Unlike dominant disorders, carriers with only one mutated gene do not exhibit symptoms but can pass the gene to offspring.

53. (C) Epidemiology
Epidemiology is the scientific study of the distribution and determinants of health-related states or events in specified populations. Researchers in this field analyze how often diseases occur and identify the factors that contribute to their spread. This data is essential for developing public health policies and targeted interventions to control outbreaks and improve the overall health of communities across different demographic groups.

54. (B) Ensuring chlorination and filtration of drinking water.
Preventing waterborne diseases requires focused efforts on improving the safety of drinking water supplies. Chlorination and filtration are effective methods for eliminating harmful bacteria and parasites from water sources. These interventions disrupt the fecal-oral transmission route, which is the primary pathway for diseases like cholera and typhoid. Such public health measures are far more effective against waterborne pathogens than using mosquito nets.

55. (D) Aedes mosquito — Chikungunya infection
Biological vectors are specific organisms that transmit pathogens from one host to another. The Aedes mosquito is the primary vector for viruses like Chikungunya and Dengue. In contrast, Malaria is transmitted by the Anopheles mosquito, and the Culex mosquito is often associated with other viral infections. Correctly identifying these pairs is fundamental for implementing effective vector control strategies to reduce the incidence of these diseases.

56. (A) Haemophilia
Non-communicable diseases include both lifestyle-related conditions and genetic disorders. While obesity, type 2 diabetes, and hypertension are heavily influenced by habits like diet and exercise, Haemophilia is a strictly genetic condition caused by an inherited mutation. Because it is present from birth and determined by DNA, it is an exception to the group of NCDs that primarily result from lifestyle choices.

57. (C) A sex-linked genetic disorder.
The inability to distinguish between red and green colors is the hallmark of color blindness, which is a sex-linked recessive genetic disorder. The genes responsible for this condition are located on the X chromosome. Because males have only one X chromosome, they are much more likely to express the condition if they inherit the mutated gene, making it a classic example of sex-linked inheritance.

58. (A) It is transmitted from animals to humans.
Zoonotic diseases are infectious conditions that naturally jump from vertebrate animals to humans. These pathogens can be viruses, bacteria, or parasites and are often spread through direct contact, bites, or contaminated food. Understanding the animal origins of these diseases is critical for global health, as many major outbreaks and pandemics originate from zoonotic transmission, requiring surveillance of both human and animal populations.

59. (D) The Environment
In the epidemiological triad, the environment includes all external factors that affect the agent and the opportunity for exposure. Stagnant water is a physical environmental factor that serves as a breeding ground for various disease vectors, such as mosquitoes. By modifying these environmental conditions through better drainage and sanitation, public health officials can significantly reduce the risk of vector-borne disease transmission in a community.

60. (B) Transmission via contaminated surgical instruments.
Direct transmission requires immediate physical contact or close-range droplets between an infected individual and a susceptible host. Examples include skin contact and mother-to-fetus transmission. In contrast, transmission via contaminated surgical instruments is considered indirect because it involves an intermediate object, known as a fomite. This distinction is important

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disability, a flat facial profile, and a distinct upward slant to the eyes. These traits result from the presence of an extra copy of chromosome 21, which disrupts normal development. Early intervention and supportive care are essential for managing the health challenges associated with this condition.

97. (B) Drinking contaminated water.
Indirect transmission involves an intermediate vehicle or vector that carries the pathogen to a new host. Drinking contaminated water is a form of vehicle-borne transmission, where the water serves as the non-living carrier for infectious agents like bacteria or viruses. This differs from direct transmission, which involves physical contact, and from vector-borne transmission, which involves a living organism like a mosquito or tick.

98. (A) Often asymptomatic until complications arise.
Chronic hypertension is frequently referred to as a silent killer because most individuals do not experience any obvious symptoms. The high blood pressure slowly damages the arteries and organs over time without the person realizing it. Often, the first sign of a problem is a serious complication like a heart attack or stroke. This highlights the importance of regular blood pressure monitoring.

99. (C) It is a quantitative defect in hemoglobin (too little).
Thalassemia is a genetic blood disorder characterized by a quantitative defect in the synthesis of globin chains. This results in the production of an insufficient amount of hemoglobin, leading to the formation of fewer healthy red blood cells. It differs from sickle cell anaemia, which is a qualitative defect where the hemoglobin is shaped incorrectly. Thalassemia patients often require long-term medical management for anemia.

100. (D) Developing countries in epidemiological transition.
The double burden of disease is most relevant to developing nations undergoing an epidemiological transition. These countries must simultaneously combat persistent infectious diseases and a rising tide of non-communicable diseases like diabetes and hypertension. This transition results from rapid urbanization and changes in lifestyle, placing immense pressure on healthcare systems that must manage both acute infectious outbreaks and long-term chronic health conditions.

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Anopheles mosquito

35. Arrange the following Indian health initiatives in the order of their launch and select the correct sequence.
1. National Malaria Control Programme
2. Universal Immunization Programme
3. Pulse Polio Programme
4. National Tuberculosis Elimination Programme (renamed)

(A) 1-2-3-4
(B) 2-1-3-4
(C) 3-4-1-2
(D) 4-3-2-1

36. Albert Sabin is associated with the development of which vaccine?
(A) Inactivated Poliovirus Vaccine (IPV)
(B) BCG Vaccine
(C) Smallpox Vaccine
(D) Oral Poliovirus Vaccine (OPV)

37. Which pair correctly identifies the year and the event in India's smallpox history?
(A) 1960 – National Smallpox Eradication Programme launched
(B) 1974 – India declared smallpox free
(C) 1977 – India declared smallpox free
(D) 1982 – Global declaration of eradication

38. Match the items in List I with those in List II and select the correct answer using the codes given below.
List I: (Public Health Term)
P. Eradication
Q. Elimination
R. Control
S. Surveillance
List II: (Definition)
1. Reduction in a specific geographic area to zero
2. Worldwide reduction to zero
3. Reduction to an acceptable level
4. Continuous scrutiny of disease occurrence

(A) P-2, Q-1, R-3, S-4
(B) P-1, Q-2, R-4, S-3
(C) P-3, Q-4, R-1, S-2
(D) P-4, Q-3, R-2, S-1

39. Which of the following is INCORRECT regarding the Nikshay Poshan Yojana?
(A) It provides nutritional support to TB patients.
(B) It involves a financial incentive of Rs 500 per month.
(C) The payment is made through Direct Benefit Transfer (DBT).
(D) It is only for patients in the final stage of TB.

40. Read the following assertion and reason and select the correct option.
Assertion (A): DOTS (Directly Observed Treatment, Short-course) is highly effective in preventing drug-resistant TB.
Reason (R): It ensures patient compliance by having a health worker or trained person observe the patient swallowing their medication.
(A) Both A and R are true and R is the correct explanation of A.
(B) Both A and R are true but R is not the correct explanation of A.
(C) A is true but R is false.
(D) A is false but R is true.

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41. In May 1980, which global body declared: "The world and all its peoples have won freedom from smallpox"?
(A) United Nations Security Council
(B) International Red Cross
(C) World Health Assembly
(D) UNICEF

42. Consider the following statements about Malaria in India:
1. Plasmodium falciparum and Plasmodium vivax are the main parasites.
2. The primary vector is the female Anopheles mosquito.
3. India has set a target to be malaria-free by 2030.

Which of the statements given above are correct?
(A) 1 and 2 only
(B) 2 and 3 only
(C) 1 and 3 only
(D) 1, 2, and 3

43. Which of the following terms describes the reduction of disease incidence to zero in a specific geographic area as a result of deliberate efforts?
(A) Disease Control
(B) Disease Eradication

(C) P-1, Q-2, R-3, S-4
(D) P-2, Q-1, R-4, S-3

9. Which of the following is NOT a core component of the Universal Immunization Programme (UIP) in India?
(A) BCG vaccine
(B) Measles-Rubella vaccine
(C) Insulin therapy
(D) Pentavalent vaccine

10. Read the following assertion and reason and select the correct option.
Assertion (A): India was declared polio-free by the WHO in 2014.
Reason (R): No new case of wild poliovirus was reported in the country for three consecutive years after January 2011.
(A) Both A and R are true and R is the correct explanation of A.
(B) Both A and R are true but R is not the correct explanation of A.
(C) A is true but R is false.
(D) A is false but R is true.

11. If a public health worker notices a high rate of dropouts in a vaccination drive due to rumors about vaccine safety, this challenge is best categorized as:
(A) Surveillance gap
(B) Technical failure
(C) Logistic constraint
(D) Vaccine hesitancy

12. Consider the following statements regarding the Smallpox Eradication Programme:
1. It was the first successful global effort to eradicate a human disease.
2. The bifurcated needle was a crucial technological innovation for the campaign.
3. The last naturally occurring case of Variola minor was recorded in Somalia in 1977.

Which of the statements given above are correct?
(A) 1 and 2 only
(B) 2 and 3 only
(C) 1 and 3 only
(D) 1, 2, and 3

13. The "Nikshay" web-based portal in India is primarily designed for the monitoring and surveillance of which disease?
(A) Malaria
(B) Polio
(C) Tuberculosis
(D) Leprosy

14. Which of the following statements about Kala-azar (Visceral Leishmaniasis) elimination in India is INCORRECT?
(A) It is transmitted by the bite of infected sandflies.
(B) The elimination target is defined as less than 1 case per 10,000 population at the block level.
(C) Indoor Residual Spraying (IRS) is a key vector control strategy.
(D) It is caused by the bacterium Mycobacterium leprae.

15. Read the following assertion and reason and select the correct option.
Assertion (A): The Universal Immunization Programme (UIP) is one of the largest public health programs in the world.
Reason (R): It provides free vaccines against life-threatening diseases to all pregnant women and children in India.
(A) Both A and R are true and R is the correct explanation of A.
(B) Both A and R are true but R is not the correct explanation of A.
(C) A is true but R is false.
(D) A is false but R is true.

16. Arrange the following milestones in the history of Smallpox in chronological order and select the correct sequence.
1. Edward Jenner develops the smallpox vaccine.
2. WHO launches the Intensified Smallpox Eradication Programme.
3. India is declared free of Smallpox.
4. Global eradication of Smallpox is officially declared.

(A) 1-2-3-4
(B) 2-1-3-4
(C) 1-3-2-4
(D) 2-3-1-4

17. Which of the following conditions is considered a prerequisite for a disease to be eradicable?
(A) Presence of an extensive animal reservoir

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(C) Reduction of incidence to zero in a defined geographical area.
(D) The reduction of mortality rate to below 1%.

74. To address "vaccine hesitancy" in a district, which approach is most effective?
(A) Interpersonal communication and addressing misconceptions
(B) Punishing families who refuse to participate in vaccination
(C) Significantly increasing the market price of all vaccines
(D) Discontinuing the vaccine supply to the affected district

75. Evaluate the given statements and choose the correct option.
Statement I: Indoor Residual Spraying (IRS) is used to kill adult mosquitoes inside houses.
Statement II: Larviciding is used to kill mosquito larvae in water bodies.
(A) Statement I is correct, but Statement II is incorrect
(B) Statement II is correct, but Statement I is incorrect
(C) Both Statement I and Statement II are correct
(D) Both Statement I and Statement II are incorrect

76. Which of the following is correct regarding the age group covered under the Universal Immunization Programme?
(A) Only children specifically aged between 5 and 10 years
(B) Infants, children up to 16 years, and pregnant women
(C) Only adult males categorized as being above 60 years
(D) Only school-going teenagers within urban municipalities

77. How is Kala-azar transmitted to humans?
(A) Contaminated food
(B) Bite of an infected Tsetse fly
(C) Bite of an infected Sandfly
(D) Direct skin contact with a patient

78. Which of the following is INCORRECT regarding the current status of Polio?
(A) Wild poliovirus type 2 and type 3 have been eradicated globally.
(B) Wild poliovirus type 1 still exists in some parts of the world.
(C) High population immunity is essential to prevent re-importation.
(D) India reports many cases of wild poliovirus annually

79. One of the reasons smallpox could be eradicated was that infected individuals always showed visible symptoms. This refers to:
(A) Absence of subclinical or carrier states
(B) Complete absence of any known animal reservoirs
(C) Extremely high infectivity among the susceptible population
(D) Consistent genetic stability of the infecting virus

80. What is the best definition of "Eradication" in the context of disease?
(A) Reduction of disease incidence to 1% of previous levels.
(B) Global extinction of the disease agent in the wild
(C) Universal vaccination of 100% of the entire population.
(D) Successful treatment of all sick patients within a hospital.

81. Which scheme under the Nikshay programme provides financial assistance for the nutrition of TB patients?
(A) Nikshay Nutrition Plan
(B) Nikshay Poshan Yojana
(C) TB Diet Scheme
(D) National TB Fund

82. Evaluate the given statements and choose the correct option.
Statement I: Community participation is the process by which individuals and families assume responsibility for their own health.
Statement II: Eradication of diseases like Polio would have been impossible without community-led awareness.
(A) Statement I is correct, but Statement II is incorrect
(B) Statement II is correct, but Statement I is incorrect
(C) Both Statement I and Statement II are

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26. Which of the following statements about the RNTCP (Revised National Tuberculosis Control Programme) is FALSE?
(A) Its primary goal was only to treat private sector patients.
(B) It has been renamed the National Tuberculosis Elimination Programme (NTEP).
(C) It relies on the DOTS strategy for treatment.
(D) It provides free diagnostic and treatment services.

27. In which year did India record its last case of wild poliovirus in Howrah, West Bengal?
(A) 2010
(B) 2011
(C) 2012
(D) 2014

28. Match the items in List I with those in List II and select the correct answer using the codes given below.
List I: (Year)
P. 1980
Q. 2014
R. 2023
S. 2025
List II: (Event/Goal)
1. Global Smallpox Eradication Declaration
2. Polio-free Certification
3. Measles-Rubella Elimination Target
4. Tuberculosis Elimination Target
(A) P-1, Q-2, R-3, S-4
(B) P-1, Q-3, R-2, S-4
(C) P-3, Q-4, R-1, S-2
(D) P-2, Q-1, R-4, S-3

29. Which of the following is NOT one of the criteria used to determine if a disease is suitable for eradication?
(A) Absence of a long-term carrier state
(B) Ease of diagnosis
(C) Presence of a non-human reservoir
(D) Availability of an effective intervention

30. Which factor is most essential for the success of the Pulse Polio Programme through high coverage at the booth level?
(A) Significant levels of international financial funding
(B) Implementation of mandatory legal enforcement measures
(C) Large-scale and high-cost antibiotic distribution
(D) Community participation and mobilization

31. Evaluate the given statements and choose the correct option.
Statement I: Lymphatic Filariasis is targeted for elimination as a public health problem in India.
Statement II: Mass Drug Administration (MDA) using DEC and Albendazole is the key strategy for filariasis elimination.
(A) Statement I is correct, but Statement II is incorrect
(B) Statement II is correct, but Statement I is incorrect
(C) Both Statement I and Statement II are correct
(D) Both Statement I and Statement II are incorrect

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32. Consider the following statements regarding the role of WHO in disease eradication:
1. WHO provides technical guidance and sets global standards.
2. WHO is responsible for declaring the official eradication of a disease globally.
3. WHO directly manages the health ministry of every member country during outbreaks.
Which of the statements given above are correct?
(A) 1 and 2 only
(B) 2 and 3 only
(C) 1 and 3 only
(D) 1, 2, and 3

33. Which parasite causes Kala-azar, also known as visceral leishmaniasis?
(A) Plasmodium vivax
(B) Leishmania donovani
(C) Wuchereria bancrofti
(D) Mycobacterium leprae

34. Which of the following is a correct statement regarding the transmission of Leprosy?
(A) Transmission via respiratory droplets during close, frequent contact
(B) Primary spread through ingestion of contaminated water sources
(C) Highly contagious nature allowing spread by a single touch
(D) Direct transmission via the bite of the

CHAPTER 12
Eradication of Diseases

1. Which of the following terms is defined as the permanent reduction to zero of the worldwide incidence of an infection caused by a specific agent?
(A) Disease elimination
(B) Disease eradication
(C) Disease control
(D) Disease surveillance

2. In which year did the World Health Assembly officially declare that smallpox had been eradicated from the globe?
(A) 1975
(B) 1977
(C) 1980
(D) 1982

3. Which vaccine type is characterized by being administered orally and containing weakened live poliovirus?
(A) IPV
(B) BCG
(C) OPV
(D) DPT

4. Evaluate the given statements and choose the correct option.
Statement I: Disease elimination refers to the reduction of disease incidence to zero in a specific geographic area.
Statement II: Disease control refers to the reduction of disease incidence, prevalence, morbidity, or mortality to a locally acceptable level.
(A) Statement I is correct, but Statement II is incorrect
(B) Statement II is correct, but Statement I is incorrect
(C) Both Statement I and Statement II are correct
(D) Both Statement I and Statement II are incorrect

5. Read the following assertion and reason and select the correct option.
Assertion (A): Smallpox was a prime candidate for global eradication.
Reason (R): The virus had no animal reservoir and an effective, stable vaccine was available.
(A) Both A and R are true and R is the correct explanation of A.
(B) Both A and R are true but R is not the correct explanation of A.
(C) A is true but R is false.
(D) A is false but R is true.

6. Which of the following pairs correctly matches the disease with its causative agent?
(A) Tuberculosis – Leishmania donovani
(B) Leprosy – Mycobacterium leprae
(C) Malaria – Wuchereria bancrofti
(D) Kala-azar – Plasmodium falciparum

7. Which strategy is considered the internationally recommended approach for tuberculosis control and involves direct observation of treatment?
(A) Pulse Polio
(B) MDT
(C) IRS
(D) DOTS

8. Match the items in List I with those in List II and select the correct answer using the codes given below.
List I: (Disease)
P. Smallpox
Q. Polio
R. Kala-azar
S. Filariasis
List II: (Causative Agent)
1. Leishmania donovani
2. Wuchereria bancrofti
3. Variola virus
4. Poliovirus
(A) P-3, Q-4, R-1, S-2
(B) P-4, Q-3, R-2, S-1

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(C) Disease Surveillance
(D) Disease Elimination

44. What is a key characteristic of the Inactivated Poliovirus Vaccine (IPV) compared to OPV?
(A) It is given orally.
(B) It is given by injection and contains killed virus.
(C) It can cause vaccine-associated paralytic polio (VAPP).
(D) It provides better intestinal immunity than OPV.

45. When people refuse or delay vaccination despite the availability of vaccine services, it is known as:
(A) Vaccine efficacy
(B) Cold chain failure
(C) Vaccine hesitancy
(D) Herd immunity

46. Evaluate the given statements and choose the correct option.
Statement I: The Universal Immunization Programme (UIP) was launched in India in 1985.
Statement II: It aims to provide at least 90% full immunization coverage to children.
(A) Statement I is correct, but Statement II is incorrect
(B) Statement II is correct, but Statement I is incorrect
(C) Both Statement I and Statement II are correct
(D) Both Statement I and Statement II are incorrect

47. Which of the following is an INCORRECT pair?
(A) Leprosy – Virus
(B) Malaria – Protozoan
(C) Tuberculosis – Bacteria
(D) Polio – Virus

48. Match the items in List I with those in List II and select the correct answer using the codes given below.
List I: (Disease)
P. Smallpox
Q. Polio
R. Tuberculosis
S. Measles
List II: (India's Elimination/Eradication Status/ Target)
1. Declared free in 1977
2. Declared free in 2014
3. Target year 2023 (Elimination)
4. Target year 2025 (Elimination)
(A) P-1, Q-2, R-4, S-3
(B) P-1, Q-2, R-3, S-4
(C) P-4, Q-3, R-2, S-1
(D) P-3, Q-4, R-1, S-2

49. Which of the following is a primary goal of the National Leprosy Eradication Programme (NLEP)?
(A) Eradication of Mycobacterium leprae from environmental soil
(B) Elimination of leprosy as a public health problem
(C) Provision of reconstructive surgery to all affected citizens
(D) Compulsory vaccination of all newborns against leprosy infection

50. Smallpox is caused by which of the following agents?
(A) Variola virus
(B) Varicella virus
(C) Vaccinia virus
(D) Poliovirus

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51. Which of the following is NOT a major challenge in the eradication of diseases?
(A) Migratory populations and cross-border transmission
(B) Fragile health systems in conflict zones
(C) High levels of public awareness and hygiene
(D) Surveillance gaps in remote areas

52. Consider the following statements regarding Polio transmission:
1. It is primarily transmitted through the fecal-oral route.
2. It can also be spread through contaminated water or food.
3. The virus multiplies in the lungs and causes respiratory failure immediately.
Which of the statements given above are correct?
(A) 1 and 2 only
(B) 2 and 3 only
(C) 1 and 3 only
(D) 1, 2, and 3

population
(B) Availability of effective diagnostic tools
(C) High rate of asymptomatic or subclinical infections
(D) Resistance of the pathogen to standard antibiotics

18. Match the items in List I with those in List II and select the correct answer using the codes given below.
List I: (Programme)
P. RNTCP
Q. NLEP
R. NVBDCP
S. Pulse Polio
List II: (Target/Feature)
1. Leprosy Eradication
2. Vector Borne Diseases
3. Tuberculosis Control
4. Mass Immunization Days
(A) P-1, Q-2, R-3, S-4
(B) P-3, Q-1, R-2, S-4
(C) P-4, Q-3, R-2, S-1
(D) P-2, Q-4, R-1, S-3

19. What is the definition of "Disease Control" in public health?
(A) Total and permanent extinction of the pathogen from the environment
(B) Permanent reduction of disease incidence to zero within a specific country
(C) Reduction of disease to an insignificant public health level
(D) Complete elimination of the insect vector responsible for host transmission

20. Read the following assertion and reason and select the correct option.
Assertion (A): The Pulse Polio Programme utilizes a "campaign" approach rather than just routine immunization.
Reason (R): To break the chain of transmission, it is necessary to immunize all children under five years simultaneously.
(A) Both A and R are true and R is the correct explanation of A.
(B) Both A and R are true but R is not the correct explanation of A.
(C) A is true but R is false.
(D) A is false but R is true.

21. Which pair is INCORRECTLY matched regarding the elimination status in India?
(A) Smallpox – Eradicated
(B) Polio – Eliminated
(C) Tuberculosis – Eradicated
(D) Maternal and Neonatal Tetanus – Eliminated

22. Consider the following statements regarding the Measles-Rubella (MR) elimination campaign:
1. It targets children in the age group of 9 months to 15 years.
2. The goal is to eliminate both Measles and Rubella from the country.
3. Rubella infection during pregnancy can lead to Congenital Rubella Syndrome (CRS).
Which of the statements given above are correct?
(A) 1 and 2 only
(B) 2 and 3 only
(C) 1 and 3 only
(D) 1, 2, and 3

23. The Global Polio Eradication Initiative (GPEI) was launched in 1988 following a resolution by which organization?
(A) UNICEF
(B) World Bank
(C) Rotary International
(D) World Health Organization

24. Integrated Vector Management (IVM) is a primary strategy under which Indian national programme?
(A) NVBDCP
(B) NLEP
(C) RNTCP
(D) UIP

25. Read the following assertion and reason and select the correct option.
Assertion (A): Malaria remains a major challenge for elimination in India despite the National Framework for Malaria Elimination.
Reason (R): The presence of multiple vector species and insecticide resistance complicates control efforts.
(A) Both A and R are true and R is the correct explanation of A.
(B) Both A and R are true but R is not the correct explanation of A.
(C) A is true but R is false.
(D) A is false but R is true.

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63. Which of the following pairs is correctly matched?
(A) Kala-azar elimination – Target incidence < 1 per 10,000 at block level
(B) Filariasis elimination – Target incidence < 5 per 1,000 at state level
(C) Tuberculosis elimination – Target incidence < 100 per 100,000 at village level
(D) Leprosy elimination – Target incidence < 50 per 100,000 at national level

64. Which of the following is NOT a pillar of the DOTS strategy?
(A) Political commitment
(B) Unsupervised self-administration of drugs
(C) Good quality sputum smear microscopy
(D) Systematic recording and reporting

65. What is the primary difference in the administration of OPV and IPV?
(A) OPV is injected; IPV is oral.
(B) OPV is oral; IPV is injected.
(C) Both are oral but given at different ages.
(D) Both are injected but in different muscles.

66. A community health worker's role in the National Leprosy Eradication Programme (NLEP) primarily includes:
(A) Early case detection and referral for MDT treatment
(B) Performing complex microsurgeries on peripheral nerves
(C) Developing new strains of the bacteria in laboratory settings
(D) Mandating lifelong isolation for all patients in colonies

67. Which of the following statements about leprosy is correct?
(A) It is caused by a protozoan parasite.
(B) It is inherited from parents to children.
(C) It mainly affects the skin and peripheral nerves.
(D) There is no cure for leprosy once symptoms appear.

68. How did social mobilization contribute to India's success in the Pulse Polio Programme?
(A) Creating expensive television and radio advertisements only
(B) Making the vaccine mandatory through strict police action
(C) Providing free food to all residents who stayed at home
(D) Engaging community leaders to build public trust

69. In which year was the last indigenous case of smallpox reported in India?
(A) 1971
(B) 1975
(C) 1977
(D) 1980

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70. Evaluate the given statements and choose the correct option.
Statement I: The RNTCP was renamed the National Tuberculosis Elimination Programme (NTEP) in 2020.
Statement II: This change reflects India's shift in focus from control to the elimination of TB.
(A) Statement I is correct, but Statement II is incorrect
(B) Statement II is correct, but Statement I is incorrect
(C) Both Statement I and Statement II are correct
(D) Both Statement I and Statement II are incorrect

71. Which pair of vaccine and disease is INCORRECTLY matched?
(A) BCG – Tuberculosis
(B) OPV – Polio
(C) Rotavirus – Diarrhea
(D) MMR – Malaria

72. The National Malaria Eradication Programme (NMEP) in India was launched in which year, following the success of the control programme?
(A) 1953
(B) 1958
(C) 1977
(D) 2003

73. What is the most appropriate definition of "Elimination" of a disease?
(A) Reduction of case numbers to such a low level that it is no longer a public health problem.
(B) The total absence of the pathogen in the entire world.

53. Mycobacterium tuberculosis is the causative agent of which disease?
(A) Leprosy
(B) Malaria
(C) Tuberculosis
(D) Filariasis

54. In disease eradication, what is the role of "Active Surveillance"?
(A) Waiting for symptomatic patients to arrive at the hospital
(B) Searching for cases in the community through house visits
(C) Analyzing historical epidemiological data and clinical trends
(D) Utilizing satellite imagery to identify potential insect vectors

55. Evaluate the given statements and choose the correct option.
Statement I: Kala-azar is endemic in certain states of India like Bihar and West Bengal.
Statement II: The elimination target for Kala-azar has already been globally achieved.
(A) Statement I is correct, but Statement II is incorrect
(B) Statement II is correct, but Statement I is incorrect
(C) Both Statement I and Statement II are correct
(D) Both Statement I and Statement II are incorrect

56. Which of the following vaccines is NOT currently part of India's Universal Immunization Programme (UIP)?
(A) HIV vaccine
(B) Pentavalent
(C) Rotavirus
(D) Fractional IPV

57. In what year did the Southeast Asia Region of WHO, including India, receive the Polio-free certification?
(A) 2011
(B) 2012
(C) 2014
(D) 2015

58. Which of the following statements about smallpox history is INCORRECT?
(A) Smallpox is still a common childhood disease in parts of Africa.
(B) Edward Jenner used cowpox material to create the first vaccine.
(C) Smallpox was the first disease for which a global eradication program was successful.
(D) Smallpox was characterized by high fever and a distinctive skin rash.

59. The use of Long-Lasting Insecticidal Nets (LLINs) is a key strategy for the control of:
(A) Tuberculosis
(B) Leprosy
(C) Polio
(D) Malaria

60. Which of the following is the best strategy for preventing the emergence of Multi-Drug Resistant Tuberculosis (MDR-TB)?
(A) Providing patients with only a single type of oral antibiotic
(B) Ensuring complete, supervised treatment through DOTS
(C) Allowing patients to discontinue medication once symptoms subside
(D) Relying exclusively on the BCG vaccine administered at birth

61. When did the WHO launch the "Intensified Smallpox Eradication Programme"?
(A) 1950
(B) 1958
(C) 1967
(D) 1980

62. Evaluate the given statements and choose the correct option.
Statement I: Rubella is also known as "German Measles".
Statement II: Rubella is generally a mild viral infection in children but dangerous for a fetus.
(A) Statement I is correct, but Statement II is incorrect
(B) Statement II is correct, but Statement I is incorrect
(C) Both Statement I and Statement II are correct
(D) Both Statement I and Statement II are incorrect

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correct
(D) Both Statement I and Statement II are incorrect

83. Which statement about Malaria surveillance in India is correct?
(A) Reliance exclusively on reports from private laboratories.
(B) Sputum testing as the primary gold standard for diagnosis.
(C) Active and passive case detection activities
(D) No requirement for blood tests for clinical confirmation.

84. Which of the following is an INCORRECT pair of disease and its related programme?
(A) Malaria – NVBDCP
(B) Tuberculosis – NTEP
(C) Leprosy – NLEP
(D) Measles – DOTS

85. Which was the first and, so far, the only human disease to be completely eradicated through global efforts?
(A) Polio
(B) Plague
(C) Smallpox
(D) Measles

86. WHO provides "Technical Support" to countries for eradication. This primarily means:
(A) Funding 100% of the country's national budget
(B) Providing evidence-based guidelines and training
(C) Sending foreign doctors to treat every patient
(D) Manufacturing all vaccines in WHO headquarters

87. Evaluate the given statements and choose the correct option.
Statement I: Tuberculosis is caused by a bacterium, while Leprosy is caused by a virus.
Statement II: Both diseases primarily affect the respiratory system.
(A) Statement I is correct, but Statement II is incorrect
(B) Statement II is correct, but Statement I is incorrect
(C) Both Statement I and Statement II are correct
(D) Both Statement I and Statement II are incorrect

88. Which of the following is the correct pair for the causative agent of Measles?
(A) Morbillivirus
(B) Variola virus
(C) Rubella virus
(D) Poliovirus

89. Which of the following was NOT a typical symptom or feature of Smallpox?
(A) High fever
(B) Centrifugal distribution of rash (more on face and limbs)
(C) Chronic cough lasting for years
(D) Deep-seated, firm pustules

90. Every year, March 24th is observed as:
(A) World TB Day
(B) World Malaria Day
(C) World Polio Day
(D) World Health Day

91. The "Cold Chain" system in the Universal Immunization Programme is used for:
(A) Maintaining medicines in a frozen state until they expire.
(B) Rapidly freezing patients presenting with high clinical fever.
(C) Storing immunization data in high-security digital cloud servers.
(D) Vaccine storage and transport at correct temperatures

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92. Which of the following is INCORRECT regarding "Pulse Polio" in India?
(A) It consists of National Immunization Days (NIDs).
(B) It only targets children living in urban slums.
(C) Two doses of OPV are given 4-6 weeks apart to children under five.
(D) It is a massive social mobilization exercise.

93. Why is "Surveillance" called the "eyes and ears" of an eradication programme?
(A) Monitoring of clinical eye and ear infections exclusively.
(B) Listening to national radio news for daily

26. (A) Its primary goal was only to treat private sector patients.
The Revised National Tuberculosis Control Programme, now known as the National Tuberculosis Elimination Programme, provides free diagnostic and treatment services to all citizens, including those in the public and private sectors. It relies on the DOTS strategy to ensure patient adherence and effective cure. The program's scope is broad, focusing on comprehensive disease management across the entire national healthcare infrastructure.

27. (B) 2011
India recorded its last indigenous case of wild poliovirus in January 2011 in the Howrah district of West Bengal. This event marked a turning point in the country's long battle against poliomyelitis. Following three consecutive years without any new cases, the World Health Organization officially certified India and the entire Southeast Asia Region as polio-free in early 2014.

28. (A) P-1, Q-2, R-3, S-4
Global and national health milestones are often marked by specific target years and declarations. Smallpox was declared eradicated globally in 1980, while India received its polio-free certification in 2014. Current national goals include the elimination of measles and rubella by 2023 and the ambitious target of eliminating tuberculosis by 2025 through intensified surveillance, improved diagnostics, and comprehensive treatment strategies.

29. (C) Presence of a non-human reservoir
For a disease to be eradicable, the pathogen must generally be limited to human hosts, as the presence of an animal reservoir makes total extinction nearly impossible. Other criteria include the absence of a long-term carrier state, ease of diagnosis, and the availability of an effective intervention like a vaccine. Smallpox met these criteria perfectly, facilitating its successful global eradication.

30. (D) Community participation and mobilization
The success of the Pulse Polio Programme in India relies heavily on massive community participation and social mobilization. Engaging local leaders, volunteers, and families ensures that nearly every child under five is reached during immunization drives. Building public trust and awareness at the grassroots level is more effective than legal enforcement or high-cost interventions in achieving the necessary vaccination coverage.

31. (C) Both Statement I and Statement II are correct
Lymphatic filariasis is targeted for elimination in India as a significant public health problem. The primary strategy involves Mass Drug Administration, where entire at-risk populations are provided with preventive medications like diethylcarbamazine and albendazole once a year. This approach aims to reduce the microfilaria levels in the community below the threshold required for mosquitoes to sustain the transmission of the parasite.

32. (A) 1 and 2 only
The World Health Organization plays a vital role in global health by providing technical guidance, setting international standards, and officially declaring the eradication of diseases. While it supports member countries during outbreaks, it does not directly manage their national health ministries. Instead, it works collaboratively with governments to implement evidence-based strategies and monitor progress toward regional and global health targets.

33. (B) Leishmania donovani
Kala-azar, also known as visceral leishmaniasis, is caused by the protozoan parasite Leishmania donovani. This parasite is transmitted to humans through the bite of infected female sandflies. The disease primarily affects internal organs such as the liver, spleen, and bone marrow. It is endemic in several states in India and is targeted for elimination through active surveillance and vector control.

34. (A) Transmission via respiratory droplets during close, frequent contact
Leprosy is transmitted through respiratory droplets from the nose and mouth during close and frequent contact with untreated cases. It is not highly contagious and cannot be spread by a single touch or casual contact. Most individuals have a natural immunity to the disease. Early diagnosis and treatment with multidrug therapy effectively stop transmission and prevent the development of physical disabilities.

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ANSWERS

1. (B) Disease eradication
Disease eradication is defined as the permanent reduction to zero of the worldwide incidence of an infection caused by a specific agent. This process implies the global extinction of the pathogen, making routine intervention measures no longer necessary. Unlike elimination, which focuses on specific geographic regions, eradication represents a final and absolute end to the disease worldwide.

2. (C) 1980
The World Health Assembly officially declared the global eradication of smallpox in May 1980. This historic milestone followed a decade-long intensified campaign led by the World Health Organization. It remains the first and only human disease to be completely eradicated, proving that coordinated international efforts and mass vaccination strategies can successfully eliminate a pathogen from the entire world.

3. (C) OPV
The Oral Poliovirus Vaccine contains live-attenuated strains of the virus, which are administered orally to stimulate a strong immune response. It is particularly effective at inducing intestinal immunity, which helps block the transmission of the virus within communities. This vaccine has been a cornerstone of global efforts to eliminate poliomyelitis due to its ease of administration.

4. (C) Both Statement I and Statement II are correct
Disease elimination involves reducing the incidence of an infection to zero within a specific geographic region through deliberate public health efforts. In contrast, disease control refers to the reduction of incidence, prevalence, morbidity, or mortality to a level that is locally acceptable. Both concepts represent different stages in the progression toward the ultimate goal of global disease eradication.

5. (A) Both A and R are true and R is the correct explanation of A.
Smallpox was uniquely suited for eradication because the virus lacked an animal reservoir, meaning it could only survive in humans. Additionally, the availability of a highly effective and heat-stable vaccine allowed for successful mass immunization campaigns. The clear clinical presentation of the disease also facilitated rapid case detection and containment, further supporting the feasibility of global eradication efforts.

6. (B) Leprosy – Mycobacterium leprae
Leprosy is a chronic infectious disease caused by the bacterium Mycobacterium leprae. It primarily affects the skin, peripheral nerves, upper respiratory tract, and eyes. While tuberculosis is caused by Mycobacterium tuberculosis and malaria by Plasmodium parasites, the specific association between leprosy and its causative agent is fundamental for accurate diagnosis and the implementation of multidrug therapy for treatment.

7. (D) DOTS
Directly Observed Treatment, Short-course is the internationally recommended strategy for controlling tuberculosis. This approach ensures patient compliance by having a trained health worker or community member observe the patient as they take their medication. By guaranteeing that the full course of treatment is completed, this method effectively reduces the transmission of the disease and prevents drug resistance.

8. (A) P-3, Q-4, R-1, S-2
Accurately identifying the causative agents for various infectious diseases is essential for public health management. Smallpox is caused by the variola virus, while poliomyelitis results from the poliovirus. Kala-azar, also known as visceral leishmaniasis, is caused by the parasite Leishmania donovani. Lymphatic filariasis is primarily caused by the filarial worm Wuchereria

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of smallpox within just over a decade of its implementation across various countries.

62. (C) Both Statement I and Statement II are correct
Rubella, commonly known as German measles, is a viral infection that usually causes a mild illness in children. However, it is extremely dangerous for pregnant women as it can lead to severe birth defects or fetal death. Preventing rubella through vaccination is essential for protecting the health of future generations and reducing the incidence of Congenital Rubella Syndrome globally.

63. (A) Kala-azar elimination – Target incidence < 1 per 10,000 at block level
The elimination of Kala-azar as a public health problem in India is defined by achieving an annual incidence of less than one case per ten thousand population at the block level. This localized target ensures that the disease is under control across all endemic areas. Reaching this goal involves intensive vector control, active case detection, and providing timely and effective treatment.

64. (B) Unsupervised self-administration of drugs
The DOTS strategy for tuberculosis control is built on five pillars: political commitment, quality diagnosis, supervised treatment, a reliable drug supply, and a systematic reporting system. Supervised treatment, rather than unsupervised self-administration, is critical to ensuring patient compliance and preventing drug resistance. This direct observation by a trained person is what makes the DOTS strategy a highly effective public health tool.

65. (B) OPV is oral; IPV is injected.
The Oral Poliovirus Vaccine is administered as drops by mouth, while the Inactivated Poliovirus Vaccine is given as an injection. OPV contains live-attenuated virus and provides intestinal immunity, whereas IPV contains killed virus and provides systemic immunity. Both vaccines are used in combination in many immunization schedules to maximize protection and ensure the safe and effective elimination of the poliovirus.

66. (A) Early case detection and referral for MDT treatment
Community health workers play a vital role in the National Leprosy Eradication Programme by conducting early case detection in their local areas. They identify individuals with suspicious skin patches or nerve involvement and refer them for diagnosis and multidrug therapy. Their work is essential for stopping transmission in the community and preventing the long-term physical complications and disabilities caused by untreated leprosy.

67. (C) It mainly affects the skin and peripheral nerves.
Leprosy is a bacterial infection that primarily targets the skin and peripheral nerves, leading to sensory loss and physical deformities if not treated. It is not an inherited disease and can be completely cured with multidrug therapy. Early diagnosis is key to preventing nerve damage. Public education is essential to remove the stigma and encourage individuals to seek medical help early.

68. (D) Engaging community leaders to build public trust
Social mobilization in the Pulse Polio Programme involves engaging community and religious leaders to build public trust and encourage participation. This approach helps overcome vaccine hesitancy and ensures that families bring their children to immunization booths. By making the program a community-wide effort, health authorities can achieve the high coverage rates necessary to interrupt the transmission of the poliovirus successfully.

69. (B) 1975
India reported its last indigenous case of smallpox in May 1975 in the state of Bihar. This achievement was the result of an intensive search and containment campaign that identified and isolated every new case. Following two more years of rigorous surveillance to ensure no further transmission occurred, the country was officially declared free of smallpox in 1977 by an international commission.

70. (C) Both Statement I and Statement II are correct
In 2020, India renamed its tuberculosis program to the National Tuberculosis Elimination Programme to signal a shift in focus from merely controlling the disease to eliminating it entirely. This change reflects the country's ambitious goal to reach a very low incidence level ahead of the

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infection or persistent environmental stages are generally more difficult to eradicate from the population.

18. (B) P-3, Q-1, R-2, S-4
Various national health programmes in India target specific diseases through specialized strategies. The Revised National Tuberculosis Control Programme focuses on tuberculosis, while the National Leprosy Eradication Programme targets leprosy. The National Vector Borne Disease Control Programme manages illnesses like malaria and filariasis. Additionally, the Pulse Polio initiative uses mass immunization days to reach children under five to eliminate poliovirus transmission.

19. (C) Reduction of disease to an insignificant public health level
Disease control is defined as the reduction of disease incidence, prevalence, morbidity, or mortality to a level that is no longer considered a major public health problem. This is achieved through deliberate interventions such as vaccination, treatment, and vector control. Unlike eradication, control requires ongoing measures to maintain the reduction and prevent the disease from re-emerging as a significant threat.

20. (A) Both A and R are true and R is the correct explanation of A.
The Pulse Polio Programme employs a campaign-based approach to rapidly boost population immunity against the poliovirus. By immunizing all children under the age of five simultaneously during National Immunization Days, the program aims to break the chain of viral transmission across the community. This synchronized effort is essential for ensuring that no susceptible children are left unprotected during an outbreak.

21. (C) Tuberculosis – Eradicated
While smallpox has been eradicated globally and polio and maternal and neonatal tetanus have been eliminated in India, tuberculosis remains a significant public health challenge. India has not yet eradicated tuberculosis; however, the government has set an ambitious target to eliminate the disease by 2025. This involves intensive case finding, supervised treatment, and nutritional support to reduce the national disease burden.

22. (D) 1, 2, and 3
The Measles-Rubella elimination campaign is a critical initiative targeting children between nine months and fifteen years of age. Its objective is to eliminate measles and control rubella, as rubella infection during pregnancy can cause severe birth defects known as Congenital Rubella Syndrome. By providing a combined vaccine, the program aims to achieve high population immunity and safeguard child and maternal health.

23. (D) World Health Organization
The Global Polio Eradication Initiative was launched in 1988 following a landmark resolution passed by the World Health Assembly. This public-private partnership is led by national governments and spearheaded by the World Health Organization along with other international partners. The initiative has successfully reduced polio cases worldwide by over ninety-nine percent since its inception through massive vaccination and surveillance efforts.

24. (A) NVBDCP
Integrated Vector Management is a strategic approach used by the National Vector Borne Disease Control Programme to manage mosquito and other insect populations. This strategy combines various biological, chemical, and environmental methods to reduce disease transmission. It is essential for controlling illnesses like malaria, dengue, and filariasis in India by targeting vectors at different stages of their life cycle in diverse environments.

25. (A) Both A and R are true and R is the correct explanation of A.
Eliminating malaria in India is a complex task due to the presence of multiple mosquito vector species that thrive in varied ecological conditions. Furthermore, the development of insecticide resistance among these vectors and drug resistance in parasites hinders progress. These technical and biological challenges necessitate the use of innovative strategies and sustained efforts to achieve the national goal of malaria elimination.

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44. (B) It is given by injection and contains killed virus.
The Inactivated Poliovirus Vaccine is administered via injection and contains killed virus particles, which cannot cause the disease or vaccine-associated paralytic polio. It induces strong systemic immunity but less intestinal immunity compared to the oral vaccine. Many countries are now using a combination of both vaccines to provide comprehensive protection while minimizing the risks associated with live-attenuated strains.

45. (C) Vaccine hesitancy
Vaccine hesitancy occurs when individuals refuse or delay vaccination despite the availability of immunization services. This complex issue is influenced by complacency, convenience, and confidence in the vaccine or health system. Public health authorities address this by providing clear information, dispelling myths, and engaging with communities to ensure that vaccines are accepted and that high immunity levels are maintained.

46. (C) Both Statement I and Statement II are correct
India launched the Universal Immunization Programme in 1985 to provide essential vaccines to infants and pregnant women nationwide. One of its primary objectives is to achieve and sustain at least ninety percent full immunization coverage for children across all districts. This program has been instrumental in reducing child mortality and controlling several vaccine-preventable diseases through a robust delivery network.

47. (A) Leprosy – Virus
Infectious diseases are classified based on their causative agents, such as bacteria, viruses, or protozoa. Tuberculosis is caused by bacteria, while malaria is caused by protozoan parasites, and polio is caused by a virus. However, leprosy is caused by the bacterium Mycobacterium leprae, not a virus, making it incorrect to classify leprosy as a viral infection in clinical and scientific practice.

48. (A) P-1, Q-2, R-4, S-3
India has distinct timelines for the eradication and elimination of various diseases. Smallpox was declared free in 1977, while polio-free status was achieved in 2014. Moving forward, the government has set specific targets, such as eliminating measles and rubella by 2023 and achieving the elimination of tuberculosis by 2025. These goals drive national health policy and the allocation of resources.

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49. (B) Elimination of leprosy as a public health problem
The National Leprosy Eradication Programme focuses on eliminating leprosy as a public health problem, defined as reaching a prevalence rate of less than one case per ten thousand population. This is achieved through early case detection, providing free multidrug therapy, and managing complications. The program also works to reduce the stigma associated with the disease and provide disability prevention services.

50. (A) Variola virus
Smallpox was a highly contagious and often fatal disease caused by the variola virus. The virus belongs to the Orthopoxvirus genus and is characterized by its large size and complex structure. It was transmitted through respiratory droplets or contact with contaminated materials. The virus's genetic stability and lack of animal hosts were key factors that facilitated its global eradication through mass vaccination.

51. (C) High levels of public awareness and hygiene
Disease eradication faces numerous challenges, including population migration, fragile health systems, and surveillance gaps in hard-to-reach areas. However, high levels of public awareness and good hygiene practices are actually facilitators of eradication, as they reduce transmission and increase vaccine acceptance. Success in eradication depends on overcoming social and logistical barriers while leveraging community support and improved living conditions to sustain health gains.

52. (A) 1 and 2 only
Poliovirus is primarily transmitted through the fecal-oral route, often involving the consumption of contaminated water or food. Once ingested, the virus multiplies in the intestines and can spread to the nervous system, potentially causing paralysis. It does not typically cause immediate respiratory failure through lung infection, although paralysis of the respiratory muscles can occur in severe cases of paralytic polio.

35. (A) 1-2-3-4
India's public health journey involves several key initiatives launched over different decades. The National Malaria Control Programme was initiated in the 1950s, followed by the Universal Immunization Programme in 1985. The Pulse Polio Programme was launched in the mid-1990s to accelerate polio elimination. More recently, the tuberculosis program was renamed the National Tuberculosis Elimination Programme to reflect its updated strategic goals.

36. (D) Oral Poliovirus Vaccine (OPV)
Albert Sabin is credited with the development of the Oral Poliovirus Vaccine, which uses live-attenuated virus strains. This vaccine is administered as oral drops, making it easy to use in mass immunization campaigns. Unlike the inactivated vaccine developed by Jonas Salk, the oral version provides strong intestinal immunity, which is crucial for stopping the person-to-person spread of the virus.

37. (C) 1977 – India declared smallpox free
India achieved a monumental victory in public health when it was declared smallpox-free in 1977. This followed the last reported indigenous case in 1975 and years of intensive surveillance and containment activities. The successful elimination of smallpox in India was a critical component of the global campaign that eventually led to the worldwide eradication of the disease in 1980.

38. (A) P-2, Q-1, R-3, S-4
Public health terminology distinguishes between various levels of disease management. Eradication refers to the permanent worldwide reduction of a disease to zero, while elimination describes the reduction to zero within a specific geographic area. Control involves reducing the disease to a level that is locally acceptable. Surveillance is the continuous and systematic scrutiny of disease occurrence to guide effective public health interventions.

39. (D) It is only for patients in the final stage of TB.
The Nikshay Poshan Yojana is a central government scheme that provides nutritional support to all notified tuberculosis patients in India. It offers a financial incentive of five hundred rupees per month for the entire duration of the treatment. This incentive is delivered through Direct Benefit Transfer to the patient's bank account, helping to improve treatment adherence and outcomes for all.

40. (A) Both A and R are true and R is the correct explanation of A.
The DOTS strategy is highly effective in preventing the development of drug-resistant tuberculosis by ensuring that patients complete their full course of medication. By having a health worker or trained person observe the patient swallowing the drugs, the strategy guarantees treatment compliance. This direct observation minimizes the risk of irregular dosing, which is the primary cause of drug resistance.

41. (C) World Health Assembly
In May 1980, the World Health Assembly, the decision-making body of the World Health Organization, officially declared that the world had won freedom from smallpox. This declaration marked the end of a disease that had caused millions of deaths over centuries. It remains a testament to what international cooperation and scientific advancement can achieve when focused on a common global goal.

42. (D) 1, 2, and 3
Malaria in India is primarily caused by the parasites Plasmodium falciparum and Plasmodium vivax, which are transmitted through the bite of infected female Anopheles mosquitoes. The country has set a strategic goal to be malaria-free by 2030, following a framework that emphasizes early diagnosis, effective treatment, and integrated vector management. These efforts are part of a broader regional malaria elimination strategy.

43. (D) Disease Elimination
Disease elimination refers to the reduction of the incidence of a specific disease to zero in a defined geographic area as a result of deliberate public health efforts. Unlike eradication, which is global and permanent, elimination requires continued intervention measures to prevent the re-establishment of transmission. Examples include the elimination of polio or maternal and neonatal tetanus in certain countries.

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bancrofti, often transmitted through mosquito bites.

9. (C) Insulin therapy
The Universal Immunization Programme in India focuses on providing life-saving vaccines to children and pregnant women to prevent infectious diseases. Vaccines such as BCG, Measles-Rubella, and the Pentavalent vaccine are core components of this initiative. Insulin therapy, however, is a treatment for diabetes mellitus and does not fall under the scope of a national immunization program targeting communicable diseases.

10. (A) Both A and R are true and R is the correct explanation of A.
India achieved a major public health milestone by being declared polio-free by the World Health Organization in 2014. This certification was granted after the country reported no new cases of wild poliovirus for three consecutive years following the last recorded case in January 2011. Rigorous surveillance and massive vaccination campaigns were instrumental in sustaining this status across all states.

11. (D) Vaccine hesitancy
Vaccine hesitancy refers to the delay in acceptance or refusal of vaccines despite the availability of vaccination services. This phenomenon is often driven by factors such as misinformation, lack of trust in health systems, or concerns about safety. Addressing this challenge requires effective communication and community engagement to build confidence and ensure high immunization coverage in target populations.

12. (D) 1, 2, and 3
The Smallpox Eradication Programme was a landmark achievement in global health, utilizing innovative tools like the bifurcated needle for efficient vaccination. It successfully eradicated the disease globally, with the last naturally occurring case of Variola minor being recorded in Somalia in 1977. These factors combined to make it the first successful international effort to eliminate a human pathogen completely.

13. (C) Tuberculosis
Nikshay is a web-based solution for monitoring and tracking patients under the National Tuberculosis Elimination Programme in India. It serves as a centralized database for notification, treatment adherence, and clinical outcomes of tuberculosis cases across the country. By digitizing health records, it allows for better surveillance and management of the disease, supporting the goal of a tuberculosis-free India.

14. (D) It is caused by the bacterium Mycobacterium leprae.
Kala-azar, or visceral leishmaniasis, is a parasitic disease transmitted by the bite of infected sandflies. It is not caused by Mycobacterium leprae, which is the causative agent of leprosy. Key elimination strategies for Kala-azar include active case detection and Indoor Residual Spraying for vector control. The elimination target is defined by achieving a very low incidence at the block level.

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15. (A) Both A and R are true and R is the correct explanation of A.
The Universal Immunization Programme in India is one of the largest public health initiatives globally, aimed at reducing mortality and morbidity from vaccine-preventable diseases. It provides free vaccines to a massive target population, including infants and pregnant women, across the country. The scale of its operations and the diversity of the diseases covered highlight its critical role in national health.

16. (A) 1-2-3-4
The history of smallpox control began with Edward Jenner developing the first vaccine in the eighteenth century. Centuries later, the World Health Organization launched the Intensified Smallpox Eradication Programme in 1967. India was subsequently declared free of the disease in 1977, leading up to the official global declaration of smallpox eradication by the World Health Assembly in May 1980.

17. (B) Availability of effective diagnostic tools
For a disease to be considered eradicable, several prerequisites must be met, including the availability of effective diagnostic tools to identify cases quickly. Other essential factors include the lack of an animal reservoir and the availability of potent intervention measures like vaccines. Diseases with high rates of asymptomatic

53. (C) Tuberculosis
Mycobacterium tuberculosis is the bacterium responsible for causing tuberculosis, a disease that primarily affects the lungs but can involve other parts of the body. The bacteria are spread from person to person through the air when an infected individual coughs or sneezes. Effective treatment involves a long course of multiple antibiotics, often managed through supervised programs to ensure complete recovery.

54. (B) Searching for cases in the community through house visits
Active surveillance is a proactive method where health workers actively search for disease cases within the community through house-to-house visits and community screenings. This approach is more effective at identifying cases than passive surveillance, which relies on patients visiting health facilities. In eradication programs, active surveillance is crucial for detecting the final remaining chains of transmission and ensuring rapid response.

55. (A) Statement I is correct, but Statement II is incorrect
Kala-azar is endemic in several states in India, particularly Bihar, Jharkhand, West Bengal, and Uttar Pradesh. While India has made significant progress toward eliminating the disease as a public health problem, global elimination has not yet been achieved. Ongoing efforts focus on vector control, active case detection, and providing effective treatment to at-risk populations in these endemic regions.

56. (A) HIV vaccine
India's Universal Immunization Programme currently includes vaccines for diseases like tuberculosis, diphtheria, pertussis, tetanus, polio, measles, and hepatitis B. While new vaccines like those for rotavirus and rubella have been added, an effective vaccine for the human immunodeficiency virus remains unavailable globally. Therefore, HIV vaccination is not part of the standard immunization schedule provided to children in India.

57. (C) 2014
In 2014, the Southeast Asia Region of the World Health Organization, including India, was officially certified as polio-free. This certification followed three years without any reported cases of wild poliovirus in the region. This achievement was a major success for the Global Polio Eradication Initiative, demonstrating that even high-risk areas could stop viral transmission through dedicated and sustained efforts.

58. (A) Smallpox is still a common childhood disease in parts of Africa.
Smallpox is no longer found anywhere in the world, as it was officially declared eradicated in 1980. This followed a successful global vaccination campaign that used the first-ever vaccine developed by Edward Jenner. The disease was known for causing high fever and a painful, distinctive rash. Claims that it remains a common childhood illness in any region are scientifically incorrect and unfounded.

59. (D) Malaria
Long-Lasting Insecticidal Nets are a primary tool for malaria control, as they provide a physical and chemical barrier against mosquitoes. These nets are treated with insecticides that kill mosquitoes upon contact, significantly reducing the risk of transmission during sleep. They are especially effective in high-transmission areas and are distributed widely through national health programs to protect vulnerable populations.

60. (B) Ensuring complete, supervised treatment through DOTS
Preventing multi-drug resistant tuberculosis requires ensuring that every patient completes their full course of prescribed antibiotics. The DOTS strategy achieves this by providing supervised treatment, which prevents irregular dosing and treatment interruption. These factors are the primary drivers of antibiotic resistance. By curing the patient on the first attempt, the risk of developing and spreading resistant strains is effectively minimized.

61. (C) 1967
The World Health Organization launched the Intensified Smallpox Eradication Programme in 1967 to accelerate the elimination of the disease worldwide. This initiative focused on providing more resources, improving vaccine quality, and implementing better surveillance and containment strategies. This intensified effort was successful, leading to the global eradication

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health updates.
(C) Detecting virus circulation to target interventions
(D) The administrative process of vaccinating every person.

94. Wuchereria bancrofti is the most common parasite causing which disease in India?
(A) Malaria
(B) Kala-azar
(C) Tuberculosis
(D) Lymphatic Filariasis

95. Which statement is correct regarding India's status in Leprosy?
(A) India achieved national-level elimination in 2005
(B) Leprosy has been eradicated from India since the year 1990.
(C) India currently has the lowest number of leprosy cases globally.
(D) Leprosy treatment is not available in any government hospitals.

96. Evaluate the given statements and choose the correct option.
Statement I: Passive surveillance relies on patients reporting to health facilities.
Statement II: Active surveillance involves health workers seeking out cases.
(A) Statement I is correct, but Statement II is incorrect
(B) Statement II is correct, but Statement I is incorrect
(C) Both Statement I and Statement II are correct
(D) Both Statement I and Statement II are incorrect

97. Which of the following is INCORRECT regarding the vector for Malaria?
(A) Only female mosquitoes bite humans.
(B) Aedes aegypti is the primary vector for Malaria.
(C) Anopheles stephensi is an important urban vector.
(D) Anopheles culicifacies is a major rural vector.

98. What is the target year set by the Government of India to eliminate Measles and Rubella?
(A) 2020
(B) 2023
(C) 2030
(D) 2045

99. Cross-border transmission is a significant challenge for the eradication of:
(A) Non-communicable diseases
(B) Genetic disorders
(C) Polio
(D) Vitamin deficiencies

100. What is the most significant long-term public health benefit of successful disease eradication?
(A) Continuous requirement for expensive annual vaccination.
(B) Significant increase in hospital admissions for other conditions.
(C) Rapid development of more complex and resistant pathogens.
(D) Permanent relief from the disease and associated costs

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global target. The strategy emphasizes scaling up diagnostics, providing nutritional support, and ensuring private sector engagement.

71. (D) MMR – Malaria
Vaccines are designed to protect against specific infectious diseases. BCG is used for tuberculosis, OPV for polio, and Rotavirus vaccine for childhood diarrhea. The MMR vaccine provides protection against measles, mumps, and rubella, but not malaria. Malaria currently does not have a widely used routine vaccine in India's national program, relying instead on vector control and prompt medical treatment for management.

72. (B) 1958
Following the success of the National Malaria Control Programme, India launched the National Malaria Eradication Programme in 1958. This ambitious initiative aimed to eliminate the disease through massive indoor residual spraying and case detection. While it initially achieved significant reductions in malaria cases, technical and biological challenges later led to a shift back toward control strategies under the integrated vector-borne disease program.

73. (C) Reduction of incidence to zero in a defined geographical area.
Elimination is defined as the reduction of disease incidence to zero within a specific geographic area through deliberate public health efforts. This differs from eradication, which involves the global extinction of the pathogen. While an eliminated disease is no longer present in a certain region, continued surveillance and intervention are necessary to prevent its re-importation from other parts of the world.

74. (A) Interpersonal communication and addressing misconceptions
Addressing vaccine hesitancy effectively requires interpersonal communication and community engagement to understand and resolve local concerns. Providing accurate information and dispelling myths can build trust in vaccines and health services. Punitive measures or increasing costs are generally counterproductive and can further alienate hesitant populations. Successful immunization programs rely on building confidence through transparency and respectful dialogue with the community.

75. (C) Both Statement I and Statement II are correct
Malaria vector control involves two main strategies: Indoor Residual Spraying and larviciding. IRS involves applying insecticides to the interior walls of homes to kill adult mosquitoes that rest there after biting. Larviciding involves treating water bodies with chemicals or biological agents to kill mosquito larvae before they develop into flying adults. Together, these methods effectively reduce the mosquito population and disease transmission.

76. (B) Infants, children up to 16 years, and pregnant women
India's Universal Immunization Programme is designed to protect infants, children up to sixteen years of age, and pregnant women from various vaccine-preventable diseases. The schedule includes a series of vaccines administered at specific intervals to ensure optimal immunity. By targeting these vulnerable groups, the program aims to reduce neonatal, infant, and child mortality while also protecting maternal health across the country.

77. (C) Bite of an infected Sandfly
Kala-azar is transmitted to humans through the bite of an infected female sandfly, which carries the Leishmania parasite. These small insects are typically found in rural areas with poor housing conditions. The disease is not spread through contaminated food or casual contact. Control efforts focus on reducing the sandfly population through insecticide spraying and ensuring early diagnosis and treatment of infected individuals.

78. (D) India reports many cases of wild poliovirus annually
India was declared polio-free in 2014 and has not reported any cases of wild poliovirus since January 2011. While wild poliovirus types two and three have been eradicated globally, type one remains endemic in a few countries. Maintaining high population immunity through vaccination and rigorous surveillance is essential to prevent the re-importation of the virus and ensure that India remains polio-free.

79. (A) Absence of subclinical or carrier states
One of the biological reasons smallpox could be eradicated was the absence of subclinical or asymptomatic infections. Every person infected

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44. Which of the following is an incorrect pair concerning the MN system?
(A) Genotype LMLM — Phenotype M
(B) Genotype LMLN — Phenotype M
(C) Genotype LNLN — Phenotype N
(D) Genotype LMLN — Phenotype MN

45. What happens when anti-A antibody meets antigen A?
(A) Hemolysis only
(B) No reaction
(C) Agglutination (Clumping)
(D) Increase in oxygen carrying capacity

46. Read the following statements about Rh incompatibility:
1. It can cause severe jaundice in newborns.
2. It is also known as Hemolytic Disease of the Newborn (HDN).
3. It only occurs if the father is Rh-negative.

Which of the above statement(s) is/are correct?
(A) 1 and 2 only
(B) 2 and 3 only
(C) 1 and 3 only
(D) 1, 2, and 3

47. Which of the following is the primary use of the MN blood group system in population genetics?
(A) Calculating gene frequencies in a population
(B) Determining blood transfusion compatibility
(C) Diagnosing autoimmune diseases
(D) Identifying viral infections

48. Match the items in List I with those in List II and select the correct answer using the codes given below:
List I: (Condition)
P. Universal Recipient
Q. Universal Donor
R. Erythroblastosis Fetalis
S. Hardy-Weinberg testing
List II: (Blood Group Factor)
1. Blood group O
2. MN system
3. Blood group AB
4. Rh factor
(A) P-3, Q-1, R-4, S-2
(B) P-1, Q-2, R-3, S-4
(C) P-4, Q-3, R-2, S-1
(D) P-2, Q-4, R-1, S-3

49. Which blood group allele is considered a null allele (amorph)?
(A) IA
(B) i
(C) IB
(D) D

50. Which of the following populations is traditionally studied by anthropologists for unique ABO distributions?
(A) Isolated tribal populations
(B) Urban metropolitan residents
(C) Hospital patients
(D) Professional athletes

51. What is the phenotypic manifestation of the MN system if an individual inherits the LM allele from one parent and the LN allele from the other?
(A) Only M
(B) Only N
(C) Both M and N
(D) Neither M nor N

52. Arrange the following in the correct chronological order of their discovery:
1. MN Blood Group System
2. ABO Blood Group System
3. Rh Blood Group System

Which of the following represents the correct order?
(A) 1-2-3
(B) 2-1-3
(C) 2-3-1
(D) 3-2-1

53. The following question consists of two statements, an Assertion (A) and a Reason (R). Select the correct answer using the codes given below:
Assertion (A): Blood group studies are vital in anthropological research.
Reason (R): Blood group frequencies remain relatively stable and reflect the genetic history of a population.
(A) Both A and R are true and R is the correct explanation of A.
(B) Both A and R are true but R is not the correct explanation of A.
(C) A is true but R is false.
(D) A is false but R is true.

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in terms of both its causative agent and primary pathology. Both require long-term antibiotic treatment for cure.

88. (A) Morbillivirus
Measles is a highly contagious viral infection caused by the morbillivirus. It is characterized by high fever, cough, and a distinctive skin rash. The virus is spread through respiratory droplets when an infected person coughs or sneezes. While measles can lead to severe complications, it is preventable through a highly effective vaccine, which is a core part of childhood immunization programs worldwide.

89. (C) Chronic cough lasting for years
Smallpox was an acute infectious disease characterized by high fever, severe headache, and a distinctive rash that progressed into deep-seated pustules. It did not cause a chronic cough lasting for years, which is a common symptom of other diseases like tuberculosis. The rapid onset and visible progression of smallpox symptoms were key features that allowed for the identification and containment of cases during eradication.

90. (A) World TB Day
March 24th is observed annually as World TB Day to raise public awareness about the devastating health, social, and economic consequences of tuberculosis. This date commemorates the day in 1882 when Dr. Robert Koch announced his discovery of the bacterium that causes the disease. The day serves as a call to action to step up efforts to end the global tuberculosis epidemic.

91. (D) Vaccine storage and transport at correct temperatures
The cold chain is a critical system of refrigerators, cold boxes, and carriers used to keep vaccines at the correct temperature from the point of manufacture to the point of administration. Maintaining this temperature range is essential for preserving vaccine potency and effectiveness. Any break in the cold chain can cause vaccines to lose their ability to protect against diseases, making this system vital.

92. (B) It only targets children living in urban slums.
The Pulse Polio Programme in India is a massive national exercise that targets all children under five years of age, regardless of their location or socioeconomic status. It utilizes National Immunization Days to provide two doses of oral polio vaccine to millions of children simultaneously. This comprehensive approach is necessary to ensure that no child is left vulnerable, thereby interrupting the transmission of the virus.

93. (C) Detecting virus circulation to target interventions
Surveillance is considered the eyes and ears of a disease eradication program because it allows health authorities to detect where the pathogen is circulating. By identifying new cases and outbreaks, surveillance guides the targeted application of interventions like vaccination and containment. Without effective surveillance, it would be impossible to know if a disease has truly been eliminated or if transmission is still occurring.

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94. (D) Lymphatic Filariasis
Lymphatic filariasis in India is primarily caused by the parasite Wuchereria bancrofti, which is transmitted through the bite of infected mosquitoes. The parasite lodges in the lymphatic system, leading to chronic swelling of limbs and organs, a condition known as elephantiasis. National elimination efforts focus on mass drug administration to interrupt transmission and provide care for those suffering from the chronic effects.

95. (A) India achieved national-level elimination in 2005
India achieved the goal of eliminating leprosy as a public health problem at the national level in 2005. This was defined as reaching a prevalence of less than one case per ten thousand population. Despite this milestone, thousands of new cases are still reported annually, requiring continued efforts in case detection and treatment to reach elimination at the state and district levels across the country.

96. (C) Both Statement I and Statement II are correct
Passive surveillance occurs when health systems collect data from patients who voluntarily seek medical care at facilities. In contrast, active surveillance involves health workers proactively searching for cases within the community. Both methods are essential for a comprehensive disease monitoring system, as they provide

2. The condition is caused by the mother's antibodies attacking fetal white blood cells.
3. Jaundice and anemia are common symptoms in the newborn.

Which of the above statement(s) is/are correct?
(A) 1 and 2 only
(B) 2 and 3 only
(C) 1 and 3 only
(D) 1, 2, and 3

27. Which molecule is responsible for the specificity of the ABO blood groups?
(A) Complex lipids
(B) Nucleic acids
(C) Inorganic salts
(D) Sugar molecules

28. Which of the following genotypes will result in the blood group AB?
(A) I^AI^A
(B) I^AI^B
(C) I^Bi
(D) ii

29. Match the items in List I with those in List II and select the correct answer using the codes given below:
List I: (Application)
P. Anthropological Studies
Q. Medicolegal Cases
R. Disease Association
S. Genetic Equilibrium
List II: (Significance)
1. Hardy-Weinberg Formula
2. Identification of Suspects
3. Study of Human Migration
4. Susceptibility to Peptic Ulcers
(A) P-3, Q-2, R-4, S-1
(B) P-1, Q-4, R-3, S-2
(C) P-2, Q-3, R-1, S-4
(D) P-4, Q-1, R-2, S-3

30. Read the following statements and select the correct answer:
Statement I: The Rh factor was first discovered in the Rhesus monkey by Landsteiner and Wiener.
Statement II: About 85% of the human population is Rh-negative.
(A) Both Statement I and Statement II are correct.
(B) Both Statement I and Statement II are incorrect.
(C) Statement I is correct but Statement II is incorrect.
(D) Statement I is incorrect but Statement II is correct.

31. Which allele is considered "recessive" in the ABO blood group system?
(A) i
(B) I^A
(C) I^B
(D) Rh

32. What is the most likely blood group of a child if both parents have blood group O?
(A) Group A
(B) Group O
(C) Group B
(D) Group AB

33. The following question consists of two statements, an Assertion (A) and a Reason (R). Select the correct answer using the codes given below:
Assertion (A): In the MN system, the genotype L^ML^N always produces the phenotype MN.
Reason (R): Alleles L^M and L^N exhibit incomplete dominance.
(A) Both A and R are true and R is the correct explanation of A.
(B) Both A and R are true but R is not the correct explanation of A.
(C) A is true but R is false.
(D) A is false but R is true.

34. Which of the following is an anthropological application of blood groups?
(A) Tracking ancient human migration patterns globally.
(B) Treating various forms of chronic clinical anemia.
(C) Developing new vaccines for bacterial infections.
(D) Studying mutations within specific viral populations.

35. Which blood group is associated with a higher risk of developing gastric cancer according to some studies?
(A) Group O
(B) Group B

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CHAPTER 13
Human Blood Groups

1. Who is credited with the discovery of the ABO blood group system in 1900?
(A) Alfred von Decastello
(B) Karl Landsteiner
(C) Alexander Wiener
(D) Adriano Sturli

2. Which of the following best defines an antigen in the context of blood groups?
(A) A surface molecule on red cells that triggers an immune response
(B) A specific protein found exclusively within the blood plasma
(C) A protective protein molecule produced by B-lymphocytes
(D) A carbohydrate molecule found only in white blood cells

3. The following question consists of two statements, an Assertion (A) and a Reason (R). Select the correct answer using the codes given below:
Assertion (A): A person with blood group O is considered a universal donor.
Reason (R): Blood group O red blood cells lack both A and B antigens on their surface.
(A) Both A and R are true and R is the correct explanation of A.
(B) Both A and R are true but R is not the correct explanation of A.
(C) A is true but R is false.
(D) A is false but R is true.

4. Which of the following statements regarding the MN blood group system is correct?
(A) It is of primary importance in routine blood transfusions.
(B) The serum of MN individuals contains natural anti-M and anti-N antibodies.
(C) The system was discovered by Landsteiner and Wiener in 1940.
(D) The inheritance is governed by two codominant alleles, LM and LN.

5. Which of the following pairs is incorrectly matched regarding the ABO system?
(A) Group A — Antigen A
(B) Group B — Antibody anti-A
(C) Group O — Antigens A and B
(D) Group AB — No antibodies

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6. Read the following statements regarding the genetics of the ABO blood group:
1. The system is controlled by three alleles: IA, IB, and i.
2. Alleles IA and IB are codominant to each other.
3. The allele 'i' is dominant over both IA and IB.

Which of the above statement(s) is/are correct?
(A) 1 and 2 only
(B) 2 and 3 only
(C) 1 and 3 only
(D) 1, 2, and 3

7. Which of the following is NOT a characteristic of the Rh blood group system?
(A) It was originally discovered through research on Rhesus monkeys.
(B) It involves the presence or absence of the specific D antigen.
(C) It follows a standard Mendelian dominant pattern of inheritance.
(D) Rh-negative people possess anti-D antibodies without exposure.

8. In a clinical setting, a patient with blood group AB positive requires a transfusion. Which blood group can they safely receive?
(A) Any blood group
(B) Only AB positive
(C) Only O negative
(D) Only A positive and B positive

9. Match the items in List I with those in List II and select the correct answer using the codes given below:
List I: (Blood Group System/Concept)

P. ABO System
Q. Rh System
R. MN System
S. Anti-D Immunoglobulin

List II: (Discoverer/Key Term)
1. Landsteiner and Levine
2. Karl Landsteiner
3. Prevention of Erythroblastosis Fetalis
4. Landsteiner and Wiener

(A) P-2, Q-4, R-1, S-3
(B) P-1, Q-3, R-4, S-2
(C) P-2, Q-1, R-4, S-3
(D) P-4, Q-2, R-3, S-1

10. Read the following statements and select the correct answer:
Statement I: Paternity testing can use blood groups to definitively prove a man is the biological father.
Statement II: Blood group testing can only be used to exclude a man from paternity, not confirm it with absolute certainty.
(A) Both Statement I and Statement II are correct.
(B) Both Statement I and Statement II are incorrect.
(C) Statement I is correct but Statement II is incorrect.
(D) Statement I is incorrect but Statement II is correct.

11. Which blood group is known as the "Universal Recipient" due to the absence of antibodies in the plasma?
(A) Group O
(B) Group A
(C) Group B
(D) Group AB

12. Arrange the following steps of Rh-induced Erythroblastosis Fetalis in the correct chronological sequence:
1. Production of anti-D antibodies in the Rh-negative mother.
2. Leakage of Rh-positive fetal RBCs into maternal circulation during the first delivery.
3. Destruction of fetal RBCs in a subsequent Rh-positive pregnancy.
4. Crossing of maternal anti-D antibodies through the placenta.

Which of the following represents the correct sequence?
(A) 2-1-4-3
(B) 1-2-3-4
(C) 2-4-1-3
(D) 4-2-1-3

13. What is the phenotypic ratio of offspring from a cross between a heterozygous Type A (IAi) parent and a heterozygous Type B (IBi) parent?
(A) 3:1 (A to B)
(B) 1:1:1:1 (A, B, AB, O)
(C) 1:2:1 (A, AB, B)
(D) All Type AB

14. The following question consists of two statements, an Assertion (A) and a Reason (R). Select the correct answer using the codes given below:
Assertion (A): Erythroblastosis fetalis rarely affects the first-born Rh-positive child of an Rh-negative mother.
Reason (R): Sensitization of the mother's immune system usually occurs during the delivery of the first Rh-positive child.
(A) Both A and R are true and R is the correct explanation of A.
(B) Both A and R are true but R is not the correct explanation of A.
(C) A is true but R is false.
(D) A is false but R is true.

15. Which antigen is present on the red blood cells of an individual with blood group B?
(A) Antigen B
(B) Antigen A
(C) Both Antigen A and B
(D) Neither Antigen A nor B

16. In forensic science, blood groups are primarily used for which of the following purposes?
(A) Determining the exact time since the victim's death.
(B) Eliminating specific suspects during an investigation.
(C) Identifying the unique DNA sequence of a perpetrator.
(D) Estimating the biological age of a deceased victim.

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17. Read the following statements regarding the MN blood group system:
1. It consists of three phenotypes: M, N, and MN.
2. The frequency of these phenotypes can be used to test Hardy-Weinberg equilibrium.
3. The MN system is highly significant in determining transfusion compatibility.

Which of the above statement(s) is/are correct?
(A) 1 and 3 only
(B) 2 and 3 only
(C) 1 and 2 only
(D) 1, 2, and 3

18. Which antibody is naturally present in the serum of an individual with blood group A?
(A) Anti-B
(B) Anti-A
(C) Both Anti-A and Anti-B
(D) No antibodies are present

19. Which of the following pairs is correctly matched regarding blood group genetics?
(A) Phenotype A — Genotype IBIB
(B) Phenotype AB — Genotype IAi
(C) Phenotype O — Genotype ii
(D) Phenotype B — Genotype IAIB

20. Match the items in List I with those in List II and select the correct answer using the codes given below:
List I: (Genotype)
P. LMLM
Q. LMLN
R. LNLN
S. Rh+ (Homozygous)
List II: (Phenotype)
1. Phenotype MN
2. Phenotype M
3. Phenotype Rh positive
4. Phenotype N
(A) P-2, Q-1, R-4, S-3
(B) P-1, Q-2, R-3, S-4
(C) P-4, Q-3, R-2, S-1
(D) P-2, Q-4, R-1, S-3

21. What is the standard medical prevention for Rh incompatibility in pregnant women?
(A) Oral antibiotics
(B) Blood transfusion to the mother before delivery
(C) Injection of Anti-D immunoglobulin
(D) Vitamin K supplements

22. A person with blood group O negative can safely donate blood to which of the following?
(A) Only other O negative individuals in the area.
(B) Any blood group regardless of Rh factor presence.
(C) Only AB positive individuals in clinical settings.
(D) Only individuals with negative Rh factors in blood.

23. The following question consists of two statements, an Assertion (A) and a Reason (R). Select the correct answer using the codes given below:
Assertion (A): Human blood group distribution varies significantly across different global populations.
Reason (R): Blood group frequencies are influenced by factors like natural selection, genetic drift, and migration.
(A) Both A and R are true and R is the correct explanation of A.
(B) Both A and R are true but R is not the correct explanation of A.
(C) A is true but R is false.
(D) A is false but R is true.

24. Which of the following blood groups contains both anti-A and anti-B antibodies in the serum?
(A) Group O
(B) Group AB
(C) Group A
(D) Group B

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25. Which blood group system is most commonly utilized in anthropological studies to demonstrate the genetic distinctness of Indian tribal populations?
(A) Kell system
(B) Duffy system
(C) ABO system
(D) Diego system

26. Read the following statements regarding Erythroblastosis Fetalis:
1. It occurs when an Rh-negative mother carries an Rh-positive fetus.

with the variola virus developed a characteristic rash, making it easy to identify and isolate cases. This meant there were no hidden carriers spreading the disease unknowingly. This visible clinical presentation allowed health workers to target containment efforts effectively during the eradication campaign.

80. (B) Global extinction of the disease agent in the wild
Eradication represents the ultimate goal of public health, defined as the permanent reduction to zero of the worldwide incidence of an infection. It involves the global extinction of the pathogen in nature, such that routine intervention measures are no longer required. Smallpox is the only human disease to have reached this status, providing a historical model for current eradication efforts against other pathogens.

81. (B) Nikshay Poshan Yojana
The Nikshay Poshan Yojana is a specific initiative under India's national tuberculosis program that provides direct financial assistance to patients for their nutritional needs. Recognizing that poor nutrition hinders recovery, the scheme provides five hundred rupees monthly to every notified patient. This support is intended to improve treatment adherence and success rates, helping patients overcome the disease while reducing the national tuberculosis burden.

82. (C) Both Statement I and Statement II are correct
Community participation is essential for the success of public health initiatives, as it empowers individuals to take responsibility for their own health and support collective goals. Programs like Pulse Polio would not have succeeded without the active involvement of community members and leaders in raising awareness and ensuring vaccine acceptance. This grassroots support is vital for achieving high coverage and sustaining long-term health improvements.

83. (C) Active and passive case detection activities
Malaria surveillance in India involves both active and passive case detection to identify and treat infections promptly. Passive surveillance occurs when symptomatic patients seek care at health facilities, while active surveillance involves health workers visiting homes to find cases. Both methods are supported by laboratory confirmation using blood tests or rapid diagnostic kits, which is essential for accurate diagnosis and effective disease management.

84. (D) Measles – DOTS
National health programs are specifically designed to address different diseases using tailored strategies. Malaria is managed under the National Vector Borne Disease Control Programme, while tuberculosis is handled by the National Tuberculosis Elimination Programme. Leprosy is targeted by its own eradication program. However, DOTS is a strategy specifically for tuberculosis, not measles, which is primarily managed through vaccination under the immunization program.

85. (C) Smallpox
Smallpox is the first and only human disease to be completely eradicated from the planet through a coordinated global effort. This milestone was achieved in 1980 after an intensive vaccination and surveillance campaign led by the World Health Organization. The eradication of smallpox saved millions of lives and eliminated the need for routine vaccination, demonstrating the power of global health cooperation and science.

86. (B) Providing evidence-based guidelines and training
The World Health Organization provides technical support to member countries by developing evidence-based guidelines, standards, and training materials for disease control and eradication. This support helps nations implement effective strategies based on the latest scientific research. While WHO coordinates international efforts and monitors progress, the actual management and funding of national health programs remain the primary responsibility of each individual country's government.

87. (D) Both Statement I and Statement II are incorrect
Tuberculosis and leprosy are both caused by bacteria belonging to the genus Mycobacterium, rather than viruses. While tuberculosis primarily targets the respiratory system through the lungs, leprosy mainly affects the skin and peripheral nerves. Therefore, characterizing leprosy as a viral respiratory illness is scientifically inaccurate

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(C) Group A
(D) Group AB

36. Read the following statements regarding blood group inheritance:
1. A child with group O cannot have a parent with group AB.
2. A parent with group O can have a child with group AB.
3. If both parents are group AB, the child can be group A, B, or AB.

Which of the above statement(s) is/are correct?
(A) 1 and 2 only
(B) 2 and 3 only
(C) 1 and 3 only
(D) 1, 2, and 3

37. Which blood group system does NOT involve naturally occurring antibodies in the serum?
(A) ABO system
(B) MN system only
(C) Rh system only
(D) Both MN and Rh systems

38. In a paternity suit, the mother is blood group A and the child is blood group AB. Which of the following blood groups could the father NOT have?
(A) Group B
(B) Group O
(C) Group AB
(D) The father could be either B or AB

39. Match the items in List I with those in List II and select the correct answer using the codes given below:
List I: (Genotype)
P. IAi
Q. IBi
R. ii
S. IAIB
List II: (Phenotype)
1. Group AB
2. Group B
3. Group A
4. Group O
(A) P-3, Q-2, R-4, S-1
(B) P-1, Q-3, R-2, S-4
(C) P-4, Q-1, R-3, S-2
(D) P-2, Q-4, R-1, S-3

40. Which of the following is the most appropriate reason for performing a cross-match before a blood transfusion?
(A) Ensuring donor cells don't clump with recipient serum.
(B) Checking the patient's current systemic hemoglobin level.
(C) Determining the donor's total white blood cell count.
(D) Checking for the presence of iron stores in the blood.

41. Which blood group system is primarily used to demonstrate the principle of codominance in humans?
(A) Rh system
(B) O phenotype of the ABO system
(C) Both MN system and AB phenotype of the ABO system
(D) Lewis system

42. Read the following statements and select the correct answer:
Statement I: Rh-positive individuals have the D antigen on their red blood cells.
Statement II: Rh-negative individuals have anti-D antibodies present in their serum from birth.
(A) Both Statement I and Statement II are correct.
(B) Both Statement I and Statement II are incorrect.
(C) Statement I is correct but Statement II is incorrect.
(D) Statement I is incorrect but Statement II is correct.

43. The following question consists of two statements, an Assertion (A) and a Reason (R). Select the correct answer using the codes given below:
Assertion (A): Blood group O is known as the universal donor.
Reason (R): People with blood group O have both anti-A and anti-B antibodies in their plasma.
(A) Both A and R are true and R is the correct explanation of A.
(B) Both A and R are true but R is not the correct explanation of A.
(C) A is true but R is false.
(D) A is false but R is true.

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different types of information and ensure that most cases are captured for public health action and response.

97. (B) Aedes aegypti is the primary vector for Malaria.
Malaria is transmitted exclusively by mosquitoes of the Anopheles genus, with different species serving as major vectors in rural and urban settings. Aedes aegypti, on the other hand, is the primary vector for other viral diseases such as dengue, chikungunya, and Zika. Distinguishing between these vectors is crucial for designing effective public health strategies and targeted environmental interventions for disease control.

98. (B) 2023
The Government of India has set an ambitious target to eliminate measles and rubella by the year 2023. Achieving this goal requires maintaining very high vaccination coverage across the country to stop the circulation of these viruses. This effort is part of a broader regional strategy to reduce childhood mortality and prevent the birth defects associated with Congenital Rubella Syndrome in children.

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99. (C) Polio
Cross-border transmission is a major challenge for polio eradication, as the virus can be easily carried by people traveling between countries. This necessitates coordinated international efforts and synchronized vaccination campaigns along borders to prevent the virus from spreading back into polio-free areas. High population immunity and rigorous surveillance are the primary defenses against the re-introduction of the virus from endemic regions.

100. (D) Permanent relief from the disease and associated costs
The global eradication of a disease provides permanent relief from the associated illness, suffering, and mortality. Economically, it eliminates the ongoing costs required for vaccination, treatment, and surveillance. Once a pathogen is officially eradicated, societies no longer need to allocate resources for its control, resulting in significant long-term savings for public health systems and improved quality of life for populations worldwide.

54. Which of the following is NOT a requirement for a successful ABO blood transfusion?
(A) Matching the donor's antigen with the recipient's antibody
(B) Checking the donor's hair color
(C) Ensuring the donor's antibodies do not destroy the recipient's RBCs
(D) Cross-matching the blood samples

55. Which blood group is generally found in the highest frequency among the general population of India?
(A) Group A
(B) Group AB
(C) Group O
(D) Group B

56. Read the following statements regarding blood groups and paternity:
1. If a child is group AB, the father cannot be group O.
2. If a child is group O, the father cannot be group AB.
3. Blood groups can definitively identify the biological father.

Which of the above statement(s) is/are correct?
(A) 1 and 2 only
(B) 2 and 3 only
(C) 1 and 3 only
(D) 1, 2, and 3

57. The term "Rh" in Rh factor is derived from which of the following?
(A) Rheumatoid factor
(B) Rhodium element
(C) Rhesus monkey
(D) Rhodesian people

58. Match the items in List I with those in List II and select the correct answer using the codes given below:
List I: (Blood Group)
P. Group A
Q. Group B
R. Group AB
S. Group O
List II: (Antibody in Plasma)
1. Anti-A
2. Anti-B
3. Both Anti-A and Anti-B
4. Neither Anti-A nor Anti-B

(A) P-2, Q-1, R-4, S-3
(B) P-1, Q-2, R-3, S-4
(C) P-4, Q-3, R-2, S-1
(D) P-3, Q-4, R-1, S-2

59. What is the medicolegal significance of finding a specific blood group at a crime scene?
(A) Proving a suspect was at the scene with absolute certainty.
(B) Determining the suspect's exact chronological biological age.
(C) Excluding a suspect if their blood group fails to match.
(D) Determining the suspect's gender and genetic predisposition.

60. Read the following statements and select the correct answer:
Statement I: Blood group B individuals have B antigens on their red cells.
Statement II: Blood group B individuals have anti-B antibodies in their serum.
(A) Both Statement I and Statement II are correct.
(B) Both Statement I and Statement II are incorrect.
(C) Statement I is correct but Statement II is incorrect.
(D) Statement I is incorrect but Statement II is correct.

61. Which of the following is a symptom of a mismatched blood transfusion?
(A) A sudden increase in appetite.
(B) Rapidly improved night vision.
(C) RBC clumping and hemolysis.
(D) Accelerated scalp hair growth.

62. Which blood group allele is codominant with IA?
(A) Allele i
(B) Allele D
(C) Allele M
(D) Allele IB

63. The following question consists of two statements, an Assertion (A) and a Reason (R). Select the correct answer using the codes given below:
Assertion (A): Anti-D immunoglobulin is given to Rh-negative mothers after the birth of an Rh-

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immunoglobulin serves a critical clinical role in preventing erythroblastosis fetalis by neutralizing fetal Rh-positive cells. These combined discoveries significantly advanced the fields of hematology and maternal health, improving transfusion safety and neonatal care.

10. (D) Statement I is incorrect but Statement II is correct.
Blood group testing is traditionally used in legal medicine to exclude a man from being the biological father. If a child possesses an antigen absent in both the mother and the alleged father, paternity is impossible. However, shared blood types do not prove paternity definitively, as many individuals share the same groups. Modern DNA profiling offers much higher precision.

11. (D) Group AB
Blood group AB is characterized by the presence of both A and B antigens on red cells and the absence of both anti-A and anti-B antibodies in the plasma. This lack of antibodies prevents the recipient from attacking donated red blood cells from any ABO type. Consequently, individuals with this blood group can safely receive transfusions from any donor.

12. (A) 2-1-4-3
Erythroblastosis fetalis begins when Rh-positive fetal cells enter an Rh-negative mother's bloodstream, usually during the first delivery. The mother's immune system then produces anti-D antibodies. In a subsequent Rh-positive pregnancy, these antibodies cross the placenta and attack the fetal red blood cells. This chronological sequence leads to severe hemolysis, anemia, and potential jaundice in the newborn child.

13. (B) 1:1:1:1 (A, B, AB, O)
A cross between parents with heterozygous genotypes IAi and IBi results in four possible offspring genotypes. These include IAIB, IAi, IBi, and ii. Each genotype corresponds to a different phenotype: AB, A, B, and O, respectively. Since each combination has an equal probability of occurrence, the resulting phenotypic ratio in the offspring is one to one to one to one.

14. (A) Both A and R are true and R is the correct explanation of A.
The first Rh-positive child of an Rh-negative mother is usually unaffected because the mother's immune system has not yet developed anti-D antibodies. Sensitization generally occurs during the first delivery when fetal red cells leak into the maternal circulation. Because antibody production takes time, the initial child is born safely before the mother's immune response can cause fetal harm.

15. (A) Antigen B
Individuals with blood group B possess the B antigen on the surface of their erythrocytes. This specific surface marker is determined by the inheritance of the IB allele. Conversely, these individuals naturally have anti-A antibodies in their plasma. The presence of the B antigen is the primary factor used to classify this blood type within the ABO classification system.

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16. (B) Eliminating specific suspects during an investigation.
In forensic investigations, blood grouping serves as a powerful exclusionary tool. If blood found at a crime scene does not match a suspect's blood type, that individual can be definitively ruled out as the source. While it cannot identify a person with the absolute uniqueness of DNA, it narrows down the pool of potential suspects by grouping different individuals.

17. (C) 1 and 2 only
The MN blood group system consists of three phenotypes: M, N, and MN, determined by two codominant alleles. Because these alleles are easily tracked, the system is frequently used to verify Hardy-Weinberg equilibrium in population genetics studies. However, it is not clinically significant for blood transfusions because humans do not typically produce the antibodies necessary to cause a reaction.

18. (A) Anti-B
In the ABO system, individuals naturally develop antibodies against the antigens they lack on their own red blood cells. A person with blood group A has the A antigen and, therefore, possesses anti-B antibodies in their serum. These antibodies are present from early childhood and will cause

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72. If a woman with blood group O marries a man with blood group AB, what are the possible blood groups of their children?
(A) A and B
(B) O and AB
(C) A, B, and O
(D) Only AB

73. The following question consists of two statements, an Assertion (A) and a Reason (R). Select the correct answer using the codes given below:
Assertion (A): Blood group O individuals are at a higher risk for duodenal ulcers.
Reason (R): There is a known statistical association between certain blood groups and specific diseases.
(A) Both A and R are true and R is the correct explanation of A.
(B) Both A and R are true but R is not the correct explanation of A.
(C) A is true but R is false.
(D) A is false but R is true.

74. Which of the following is the most important factor in preventing Erythroblastosis Fetalis?
(A) Early Anti-D administration to the mother.
(B) Ensuring proper daily nutrition for the mother.
(C) Providing blood transfusions to the father.
(D) Performing regular exercise during pregnancy.

75. Which blood group is referred to as "the universal recipient" for plasma transfusions (not RBCs)?
(A) Group AB
(B) Group A
(C) Group B
(D) Group O

76. Read the following statements regarding the MN system:
1. It is based on two antigens, M and N.
2. It follows a Mendelian pattern of inheritance.
3. It was discovered by Landsteiner and Levine.

Which of the above statement(s) is/are correct?
(A) 1 and 2 only
(B) 2 and 3 only
(C) 1 and 3 only
(D) 1, 2, and 3

77. Which of the following blood groups would have neither anti-A nor anti-B antibodies in the serum?
(A) Blood group A
(B) Blood group B
(C) Blood group AB
(D) Blood group O

78. Match the items in List I with those in List II and select the correct answer using the codes given below:
List I: (Study Observation)
P. High frequency of Group B
Q. Absence of Antigen A
R. Rh-negative rarity
S. MN distribution
List II: (Significance)
1. Isolated South American tribes
2. Common in many Indian tribes
3. Population genetics markers
4. Found in some Asian populations
(A) P-2, Q-1, R-4, S-3
(B) P-1, Q-2, R-3, S-4
(C) P-4, Q-3, R-2, S-1
(D) P-3, Q-4, R-1, S-2

79. What is the role of Landsteiner's Law in blood grouping?
(A) RBC antigens require the absence of matching serum antibodies.
(B) It describes the Mendelian inheritance patterns of Rh factors.
(C) It explains the expected mutation rate of blood group alleles.
(D) It defines the chemical structure of the hemoglobin molecule.

80. Read the following statements and select the correct answer:
Statement I: The Rh factor is an inherited protein.
Statement II: An Rh-positive person can receive Rh-negative blood without any immediate adverse reaction.
(A) Both Statement I and Statement II are correct.
(B) Both Statement I and Statement II are incorrect.
(C) Statement I is correct but Statement II is

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inherits one IA allele from one parent and one IB allele from the other, both antigens are fully and equally expressed on the surface of their red blood cells. This genotype is the only way to produce the AB phenotype in humans.

29. (A) P-3, Q-2, R-4, S-1
Blood groups have diverse applications across different scientific fields. Anthropologists use them to study human migration, while forensic scientists use them to identify or exclude suspects in medicolegal cases. Certain blood groups are statistically linked to disease susceptibility, such as group O and peptic ulcers. Geneticists use systems like MN to test population equilibrium using the Hardy-Weinberg formula.

30. (C) Statement I is correct but Statement II is incorrect.
The Rh factor was indeed discovered through experiments with Rhesus monkeys, which led to the identification of the D antigen in humans. However, the majority of the human population—roughly 85%—is Rh-positive, not Rh-negative. Rh-negative individuals are a minority in most global populations, with the exact frequency varying by ethnicity. This distinction is vital for clinical medicine.

31. (A) i
The ABO blood group system is governed by three alleles: IA, IB, and i. The allele designated as i is considered recessive because it does not result in the production of functional surface antigens. For this trait to be expressed phenotypically as group O, an individual must inherit two copies of this recessive allele from their parents.

32. (B) Group O
Since blood group O is a recessive trait, parents with this blood type must both have the genotype 'ii'. Consequently, they can only pass the 'i' allele to their offspring. This means that children born to two group O parents will invariably have the genotype 'ii' and the phenotype O, as there are no dominant alleles present.

33. (C) A is true but R is false.
In the MN system, the genotype LMLN always results in the MN phenotype because the alleles exhibit codominance, not incomplete dominance. Codominance means that both the M and N antigens are expressed simultaneously and fully on the red blood cell surface. In contrast, incomplete dominance would result in a blended phenotype, which is not what occurs in this system.

34. (A) Tracking ancient human migration patterns globally.
Physical anthropologists use the distribution frequencies of various blood groups to reconstruct historical human movements. Because blood group alleles are inherited and relatively stable, differences in their frequencies between populations can reveal patterns of migration, isolation, and interbreeding over thousands of years. This genetic data provides a clearer picture of how modern human populations spread across the globe.

35. (C) Group A
Extensive medical research has identified statistical associations between certain ABO blood groups and specific health conditions. Statistical evidence suggests that individuals with blood group A may have a slightly higher risk of developing gastric cancer compared to other groups. While the biological reason for this is not fully understood, these findings are significant for clinical epidemiology and disease prevention studies.

36. (C) 1 and 3 only
A parent with group AB always passes either an IA or IB allele, so they cannot have a child with group O. Conversely, two parents with group AB can produce children with group A, B, or AB, as they can contribute different combinations of these alleles. Group O parents can only have group O children because they lack dominant alleles.

37. (D) Both MN and Rh systems
Unlike the ABO system, which features naturally occurring isoagglutinins, the MN and Rh systems do not usually involve antibodies unless an individual is specifically exposed to foreign red cells. In the Rh system, antibodies develop only after sensitization. In the MN system, antibodies are extremely rare in humans, making these systems different from the ABO system regarding natural immune responses.

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90. Read the following statements and select the correct answer:
Statement I: The discovery of the Rh factor helped explain many previously mysterious transfusion reactions.
Statement II: The Rh system was discovered after the MN system.
(A) Both Statement I and Statement II are correct.
(B) Both Statement I and Statement II are incorrect.
(C) Statement I is correct but Statement II is incorrect.
(D) Statement I is incorrect but Statement II is correct.

91. Which antigen is tested to determine if a person is Rh-positive or Rh-negative?
(A) Antigen M
(B) Antigen A
(C) Antigen B
(D) Antigen D

92. Which of the following results in a "Universal Donor" status?
(A) Presence of all antigens
(B) Absence of A, B, and D antigens
(C) Absence of all antibodies
(D) Presence of anti-D antibodies

93. The following question consists of two statements, an Assertion (A) and a Reason (R). Select the correct answer using the codes given below:
Assertion (A): The MN blood group system is rarely used in clinical transfusion medicine.
Reason (R): Humans do not naturally possess anti-M or anti-N antibodies in their serum.
(A) Both A and R are true and R is the correct explanation of A.
(B) Both A and R are true but R is not the correct explanation of A.
(C) A is true but R is false.
(D) A is false but R is true.

94. Which of the following is a common genotype for the MN system?
(A) LA LB
(B) LD Ld
(C) Li Li
(D) LM LN

95. In paternity testing, if the mother is group O and the child is group A, which blood group must the father possess?
(A) Group A or AB
(B) Group O only
(C) Group B only
(D) Group AB only

96. Read the following statements regarding ABO anthropology:
1. Native Americans have a very high frequency of blood group O.
2. Blood group B is virtually absent in some indigenous Australian populations.
3. European populations show a higher frequency of Rh-negative individuals than Asian populations.

Which of the above statement(s) is/are correct?
(A) 1 and 2 only
(B) 2 and 3 only
(C) 1 and 3 only
(D) 1, 2, and 3

97. Which of the following terms describes the reaction where blood cells clump together due to an antibody-antigen interaction?
(A) Coagulation
(B) Agglutination
(C) Precipitation
(D) Sedimentation

98. Match the items in List I with those in List II and select the correct answer using the codes given below:
List I: (Phenotype)
P. M
Q. N
R. MN
S. O
List II: (Genotype)
1. LNLN
2. ii
3. LMLM
4. LMLN
(A) P-3, Q-1, R-4, S-2
(B) P-1, Q-2, R-3, S-4
(C) P-4, Q-3, R-2, S-1
(D) P-2, Q-4, R-1, S-3

99. Which of the following is a mandatory step before any human blood transfusion?

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positive child.
Reason (R): It destroys any fetal Rh-positive cells in the mother's circulation before her immune system can react.
(A) Both A and R are true and R is the correct explanation of A.
(B) Both A and R are true but R is not the correct explanation of A.
(C) A is true but R is false.
(D) A is false but R is true.

64. Which of the following is NOT an application of Hardy-Weinberg equilibrium in MN blood groups?
(A) Calculating the frequency of the LM allele
(B) Determining the age of the population
(C) Calculating the frequency of the LN allele
(D) Checking if the population is in genetic equilibrium

65. Which blood group has been traditionally associated with a lower risk of certain infectious diseases, though studies vary?
(A) Group O
(B) Group A
(C) Group B
(D) Group AB

66. Read the following statements regarding the Rh system:
1. Rh-positive is a dominant trait.
2. Rh-negative individuals are homozygous recessive (dd).
3. Rh-positive individuals can be either homozygous (DD) or heterozygous (Dd).

Which of the above statement(s) is/are correct?
(A) 1 and 2 only
(B) 2 and 3 only
(C) 1 and 3 only
(D) 1, 2, and 3

67. Which of the following is a characteristic of the antibodies in the ABO system?
(A) They are present only after a blood transfusion.
(B) They are produced by red blood cells.
(C) They are naturally occurring (Isoagglutinins).
(D) They are only found in Rh-negative individuals.

68. Match the items in List I with those in List II and select the correct answer using the codes given below:
List I: (Discovery Year)
P. 1900
Q. 1927
R. 1940
S. 1902
List II: (Blood Group/System)
1. MN System
2. ABO System
3. AB Group (Decastello/Sturli)
4. Rh System
(A) P-2, Q-1, R-4, S-3
(B) P-1, Q-2, R-3, S-4
(C) P-3, Q-4, R-1, S-2
(D) P-4, Q-3, R-2, S-1

69. In terms of population variation, which region or group often shows a high frequency of blood group B?
(A) Western Europe
(B) Native Americans
(C) Central Asia and India
(D) Australian Aborigines

70. Read the following statements and select the correct answer:
Statement I: MN blood group antigens are located on the surface of erythrocytes.
Statement II: The MN blood group system is crucial for determining organ transplant compatibility.
(A) Both Statement I and Statement II are correct.
(B) Both Statement I and Statement II are incorrect.
(C) Statement I is correct but Statement II is incorrect.
(D) Statement I is incorrect but Statement II is correct.

71. Which of the following genotypes represents a person with Rh-negative blood?
(A) DD
(B) Dd
(C) ID
(D) dd

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ANSWERS

1. (B) Karl Landsteiner
Karl Landsteiner discovered the ABO blood group system in 1900 by observing agglutination when mixing serum and red cells. His work laid the foundation for safe blood transfusions and earned him a Nobel Prize. This system identifies four main groups based on specific antigens on red cell surfaces. It remains the most important system in clinical medicine.

2. (A) A surface molecule on red cells that triggers an immune response
Antigens in blood grouping are specific molecules found on the surface of red blood cells. These proteins or carbohydrates serve as markers that the immune system uses to distinguish self from non-self. When foreign antigens enter the body, they can stimulate the production of antibodies. The presence or absence of these antigens determines an individual's specific blood type.

3. (A) Both A and R are true and R is the correct explanation of A.
Individuals with blood group O are categorized as universal donors because their red blood cells do not possess A or B antigens. Consequently, their blood can be safely transfused into recipients of any ABO group without triggering an immediate immune reaction. This absence of surface antigens prevents the recipient's antibodies from recognizing the donated cells as foreign invaders.

4. (D) The inheritance is governed by two codominant alleles, LM and LN.
The MN blood group system is characterized by two specific antigens determined by codominant alleles. These alleles allow for three distinct phenotypes based on the combination inherited from parents. Unlike the ABO system, humans generally lack naturally occurring antibodies against these antigens. This makes the system particularly useful in population genetics and paternity testing rather than routine clinical transfusions.

5. (C) Group O — Antigens A and B
Blood group O is defined by the complete absence of A and B antigens on the surface of red blood cells. Instead, individuals with this type naturally possess both anti-A and anti-B antibodies in their plasma. Other groups are correctly defined by their specific antigens: group A has A antigens, group B has B antigens, and AB has both.

6. (A) 1 and 2 only
The inheritance of ABO blood groups involves three alleles at a single locus. Alleles producing antigens A and B are codominant, meaning both are fully expressed in individuals who inherit one of each. Conversely, the allele associated with group O is recessive to both. This genetic mechanism results in four phenotypes: A, B, AB, and O, depending on combinations.

7. (D) Rh-negative people possess anti-D antibodies without exposure.
The Rh blood group system primarily focuses on the D antigen presence. While the ABO system involves naturally occurring antibodies, the Rh system does not. Rh-negative individuals only develop anti-D antibodies after being exposed to Rh-positive blood, such as during pregnancy or transfusion. This sensitized state is a crucial consideration in preventing hemolytic disease of the newborn and transfusion reactions.

8. (A) Any blood group
Individuals with the AB positive blood type are known as universal recipients. Their plasma does not contain antibodies against A, B, or Rh antigens, allowing them to safely receive red blood cells from any donor. This versatility is vital in emergency medical situations where specific blood types might be unavailable. It ensures compatibility across all major ABO and Rh categories.

9. (A) P-2, Q-4, R-1, S-3
Karl Landsteiner discovered the ABO system, while Landsteiner and Levine identified the MN system. Landsteiner and Wiener later discovered the Rh factor using Rhesus monkeys. Anti-D

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(A) Psychological evaluation of the donor
(B) Checking the donor's family history of five generations
(C) ABO and Rh typing of both donor and recipient
(D) Measuring the recipient's height

100. What is the main anthropological significance of the distribution of blood groups in Indian tribes?
(A) Proving all regional tribes share a single origin.
(B) Showing specific tribes are prone to certain diseases.
(C) Determining the historical diet of indigenous groups.
(D) Understanding genetic isolation and tribal migration.

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agglutination if the person receives a transfusion of blood containing the B antigen.

19. (C) Phenotype O — Genotype ii
Phenotype O is the result of inheriting two recessive alleles, denoted as 'ii'. This genotype prevents the expression of both A and B antigens on the red cell surface. Individuals with this phenotype are known as universal donors. In contrast, phenotypes A and B can be either homozygous or heterozygous, while the AB phenotype requires both dominant alleles.

20. (A) P-2, Q-1, R-4, S-3
Genotypes in the MN and Rh systems directly determine specific phenotypes. Homozygous LMLM results in phenotype M, while homozygous LNLN results in phenotype N. The heterozygous LMLN combination displays the MN phenotype due to codominance. Similarly, individuals who are homozygous for the D allele (DD) are Rh-positive. These genetic markers are essential for mapping human variation and inheritance.

21. (C) Injection of Anti-D immunoglobulin
To prevent Rh incompatibility issues, Rh-negative mothers are given an injection of anti-D immunoglobulin shortly after the birth of an Rh-positive child. This treatment works by identifying and destroying any fetal Rh-positive red cells that entered the mother's circulation. By doing so, it prevents the mother's immune system from becoming sensitized and producing its own permanent anti-D antibodies.

22. (B) Any blood group regardless of Rh factor presence.
A person with O negative blood is a universal donor because their red blood cells lack A, B, and Rh antigens. This means their cells will not trigger an immune attack when introduced into a recipient of any blood group. This blood type is critical in emergency medicine when there is no time to perform a cross-match for patients.

23. (A) Both A and R are true and R is the correct explanation of A.
Global blood group distribution is not uniform and varies significantly between different ethnic and geographic populations. These differences arise over time due to evolutionary forces such as natural selection, genetic drift, and historical human migrations. Anthropologists study these variations to trace the origins of populations and understand how environmental pressures might have influenced the survival and spread of specific alleles.

24. (A) Group O
Individuals with blood group O do not have A or B antigens on their red blood cells. As a biological consequence, they naturally develop both anti-A and anti-B antibodies in their plasma. This presence of both antibodies means they can only receive blood from other group O donors, but they can safely donate their red cells to all other types.

25. (C) ABO system
The ABO blood group system is a primary tool in physical anthropology for studying the genetic diversity of human populations. In India, tribal groups often show distinct ABO frequencies that differ from non-tribal populations. By analyzing these frequencies, researchers can demonstrate genetic isolation and the unique historical lineages of various tribal communities. It remains a standard marker for population studies.

26. (C) 1 and 3 only
Erythroblastosis fetalis is a hemolytic condition occurring when an Rh-negative mother's antibodies attack an Rh-positive fetus's red blood cells. This immune reaction leads to the destruction of fetal erythrocytes, causing symptoms like severe anemia and jaundice in the newborn. It does not involve white blood cells; rather, the focus is entirely on the destruction of red blood cells by maternal antibodies.

27. (D) Sugar molecules
The specificity of ABO blood groups is determined by the specific sugar molecules attached to the precursor H substance on red blood cells. Group A is defined by N-acetylgalactosamine, while group B is defined by galactose. Individuals with group O lack these additional sugars. These terminal carbohydrates are what the immune system recognizes as specific antigens during blood type identification.

28. (B) IAIB
The AB blood group is the result of codominance between the IA and IB alleles. When an individual

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incorrect.
(D) Statement I is incorrect but Statement II is correct.

81. Which of the following is a possible genotype for a person with blood group A?
(A) IAIB
(B) IAi
(C) ii
(D) IBi

82. Which of the following is true for an individual with the MN phenotype?
(A) They possess both M and N antigens.
(B) They possess only the M antigen.
(C) They possess only the N antigen.
(D) They possess neither M nor N antigens.

83. The following question consists of two statements, an Assertion (A) and a Reason (R). Select the correct answer using the codes given below:
Assertion (A): People with blood group AB can receive blood from any ABO group.
Reason (R): Their plasma lacks both anti-A and anti-B antibodies, so donor cells will not be attacked.
(A) Both A and R are true and R is the correct explanation of A.
(B) Both A and R are true but R is not the correct explanation of A.
(C) A is true but R is false.
(D) A is false but R is true.

84. What is the phenotypic frequency of blood group O in a population if the frequency of allele 'i' is 0.6?
(A) 0.12
(B) 0.36
(C) 0.40
(D) 0.60

85. Which of the following is NOT a medicolegal application of blood groups?
(A) Disputed paternity cases
(B) Identification of a murderer from bloodstains
(C) Determining the cause of death by poisoning
(D) Exonerating an innocent person

86. Read the following statements regarding the inheritance of the Rh factor:
1. Rh-positive (D) is dominant over Rh-negative (d).
2. A cross between two heterozygous Rh-positive parents (Dd) can produce an Rh-negative child.
3. Two Rh-negative parents can have an Rh-positive child.

Which of the above statement(s) is/are correct?
(A) 1 and 2 only
(B) 2 and 3 only
(C) 1 and 3 only
(D) 1, 2, and 3

87. Which blood group is sometimes called the "commoner's blood group" in the context of the Indian subcontinent due to its high prevalence?
(A) A
(B) AB
(C) Rh-negative
(D) B

88. Match the items in List I with those in List II and select the correct answer using the codes given below:
List I: (Blood Group)
P. Group A
Q. Group B
R. Group AB
S. Group O
List II: (Antigen on RBC)
1. Antigen B
2. Antigen A
3. Neither A nor B
4. Both A and B
(A) P-2, Q-1, R-4, S-3
(B) P-1, Q-2, R-3, S-4
(C) P-4, Q-3, R-2, S-1
(D) P-3, Q-4, R-1, S-2

89. Which of the following is the best description of the allele 'i'?
(A) It produces a modified form of the A antigen.
(B) It functions as a standard dominant blood allele.
(C) It fails to produce functional A or B antigens.
(D) It is only expressed in Rh-negative individuals.

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38. (B) Group O
A child with blood group AB must inherit an A allele from one parent and a B allele from the other. If the mother is group A, she provides the A allele. Therefore, the father must provide the B allele. A man with group O has the genotype 'ii' and lacks the B allele, making it impossible for him to be the father.

39. (A) P-3, Q-2, R-4, S-1
The ABO phenotypes are directly determined by the combination of alleles IA, IB, and i. Genotype IAi results in group A, while genotype IBi results in group B because A and B are dominant over O. Genotype ii produces group O, and the combination of IA and IB results in group AB. This matching is fundamental to understanding human genetics.

40. (A) Ensuring donor cells don't clump with recipient serum.
Cross-matching is a vital safety procedure performed before a blood transfusion to verify compatibility. It involves mixing the donor's red blood cells with the recipient's serum to check for agglutination or clumping. If clumping occurs, it indicates an incompatible match that could lead to a life-threatening transfusion reaction. This step confirms the accuracy of the initial blood typing.

41. (C) Both MN system and AB phenotype of the ABO system
Codominance occurs when both alleles in a heterozygous pair are fully expressed. In the ABO system, this is seen in the AB phenotype, where both A and B antigens are present. Similarly, the MN system demonstrates codominance because individuals with the LMLN genotype express both M and N antigens. These systems are classic examples used to teach complex genetic inheritance.

42. (C) Statement I is correct but Statement II is incorrect.
Rh-positive individuals are defined by the presence of the D antigen on their red blood cells. However, Rh-negative individuals do not naturally possess anti-D antibodies at birth. These antibodies are only produced if the person's immune system is exposed to Rh-positive blood through a transfusion or pregnancy. This differs from the ABO system, where antibodies are present naturally.

43. (B) Both A and R are true but R is not the correct explanation of A.
While it is true that blood group O is the universal donor and that group O individuals have both anti-A and anti-B antibodies, the second statement does not explain the first. Group O is the universal donor because its red cells lack A and B antigens, not because its plasma contains antibodies. In fact, antibodies are typically removed during the transfusion process.

44. (B) Genotype LMLN — Phenotype M
In the MN blood group system, the alleles LM and LN are codominant. This means that an individual with the genotype LMLN will express both M and N antigens, resulting in the MN phenotype. Therefore, the claim that this genotype results only in phenotype M is incorrect. Homozygous genotypes LMLM and LNLN result in phenotypes M and N, respectively.

45. (C) Agglutination (Clumping)
When an antibody, such as anti-A, encounters its corresponding antigen, like antigen A, an immune reaction occurs. This reaction causes the red blood cells to stick together and form visible clusters, a process known as agglutination. This clumping can block small blood vessels and lead to hemolysis, which is why matching blood types before transfusion is absolutely essential for patient safety.

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46. (A) 1 and 2 only
Rh incompatibility, or hemolytic disease of the newborn, occurs when an Rh-negative mother carries an Rh-positive fetus. This condition causes the destruction of fetal red blood cells, leading to severe jaundice and anemia in the infant. For this to happen, the father must be Rh-positive to pass the dominant D allele to the child; it cannot occur if he is Rh-negative.

47. (A) Calculating gene frequencies in a population
The MN blood group system is primarily utilized in population genetics rather than clinical settings. Because it has two codominant alleles and three distinct phenotypes, it allows researchers to easily calculate allele frequencies using the Hardy-Weinberg principle. This data

the D antigen, is dominant over Rh-negative. This means Rh-positive individuals can be homozygous (DD) or heterozygous (Dd). Rh-negative individuals must be homozygous recessive (dd). Consequently, two Rh-positive parents who are both heterozygous can have an Rh-negative child, reflecting standard genetic inheritance rules.

67. (C) They are naturally occurring (Isoagglutinins).
Antibodies in the ABO system, known as isoagglutinins, are unique because they are naturally occurring in the serum of individuals shortly after birth. They develop without any prior exposure to foreign blood through transfusions or pregnancy. This is in sharp contrast to the Rh system, where antibodies only develop after the immune system is specifically challenged by the presence of the D antigen.

68. (A) P-2, Q-1, R-4, S-3
The timeline of blood group discovery began with the ABO system in 1900. The rare AB group was identified shortly after in 1902 by Decastello and Sturli. Later, the MN system was discovered in 1927, and the Rh system followed in 1940. These milestones represent the major eras of advancement in our understanding of human blood chemistry and genetics during the twentieth century.

69. (C) Central Asia and India
Global maps of blood group distribution show that the frequency of the B allele is highest in Central Asia and the Indian subcontinent. In these regions, blood group B often exceeds the frequency of group A, which is a reverse of the pattern seen in Western Europe. This unique geographic distribution is a key area of study for anthropologists researching human evolution and history.

70. (C) Statement I is correct but Statement II is incorrect.
MN blood group antigens are indeed located on the surface of erythrocytes, making them useful for paternity testing and population studies. However, the MN system is not significant for organ transplant or blood transfusion compatibility. Clinical compatibility relies almost entirely on the ABO and Rh systems, as the MN system rarely triggers the immune response necessary to cause graft rejection or transfusion reactions.

71. (D) dd
Rh-negative blood is a recessive genetic trait. To express this phenotype, an individual must inherit two copies of the recessive allele, represented as 'dd'. If even one dominant 'D' allele is present, the person will have Rh-positive blood. This homozygous recessive state means that Rh-negative individuals do not produce the D antigen on their red blood cell surfaces.

72. (A) A and B
When an individual with group O (genotype ii) mates with someone with group AB (genotype IAIB), all children will inherit one 'i' allele from the first parent. From the second parent, they will receive either an 'IA' or an 'IB' allele. This results in offspring with either genotype IAi (Phenotype A) or IBi (Phenotype B), with no possibility of O or AB.

73. (A) Both A and R are true and R is the correct explanation of A.
Medical statistics show a clear association between blood group O and an increased risk of developing duodenal ulcers. This is a classic example of how certain blood group antigens may correlate with physiological susceptibilities. While the exact biochemical mechanism is still a subject of research, the statistical link is well-documented and serves as evidence for the medical significance of blood group distribution.

74. (A) Early Anti-D administration to the mother.
The most effective way to prevent erythroblastosis fetalis is the timely administration of anti-D immunoglobulin to an Rh-negative mother. This treatment must occur after any event where fetal blood might enter her circulation, such as delivery or miscarriage. By neutralizing fetal Rh-positive cells, it prevents her immune system from forming antibodies that would threaten future pregnancies, ensuring fetal health and survival.

75. (D) Group O
While AB is the universal recipient for red blood cells, group O is considered the universal recipient for plasma transfusions. This is because group O plasma contains both anti-A and anti-B

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57. (C) Rhesus monkey
The term “Rh” is an abbreviation for Rhesus, the genus of monkeys used in the research that led to the system’s discovery. In 1940, Landsteiner and Wiener found that rabbits immunized with Rhesus monkey blood produced antibodies that also reacted with human red blood cells. This discovery revealed the D antigen, which is the most significant factor in the Rh system.

58. (A) P-2, Q-1, R-4, S-3
The ABO system is defined by the reciprocal relationship between antigens and antibodies. Group A individuals have anti-B antibodies, while group B individuals have anti-A antibodies. Group AB individuals have neither antibody, allowing them to receive any blood. Group O individuals have both anti-A and anti-B antibodies, meaning they can only receive blood from other group O donors.

59. (C) Excluding a suspect if their blood group fails to match.
In medicolegal contexts, blood groups are primarily used for exclusion. If blood found at a crime scene is group A and a suspect is group B, that suspect is definitively cleared of being the source. While blood grouping cannot identify a specific individual with absolute certainty like DNA can, its power to exclude innocent individuals remains a valuable forensic tool.

60. (C) Statement I is correct but Statement II is incorrect.
Individuals with blood group B are characterized by having B antigens on the surface of their red blood cells. According to Landsteiner’s Law, these individuals naturally possess the antibody for the antigen they lack, which is anti-A. Therefore, they do not have anti-B antibodies in their serum, as this would cause their own blood cells to clump and Hemolyze.

61. (C) RBC clumping and hemolysis.
A mismatched blood transfusion triggers an immediate immune response where the recipient’s antibodies attack the donor’s red blood cells. This leads to agglutination, or clumping, and subsequent hemolysis, where the cells are destroyed. These reactions can cause severe medical complications, including kidney failure and shock, highlighting why accurate blood typing and cross-matching are mandatory clinical procedures before any transfusion.

62. (D) Allele IB
Codominance occurs when two different alleles at the same locus are both fully expressed in the phenotype. In the ABO system, the IA and IB alleles are codominant with each other. When an individual inherits both, their red blood cells display both A and B antigens. In contrast, both IA and IB are completely dominant over the recessive i allele.

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63. (A) Both A and R are true and R is the correct explanation of A.
Administering anti-D immunoglobulin to an Rh-negative mother is a standard preventative measure. It works by binding to and destroying any Rh-positive fetal red cells that may have entered her bloodstream during childbirth. By removing these cells before her immune system can recognize them and produce its own antibodies, the treatment prevents sensitization and protects future Rh-positive pregnancies from hemolytic disease.

64. (B) Determining the age of the population
The Hardy-Weinberg equilibrium is a mathematical model used to calculate allele and genotype frequencies and to check if a population is in genetic equilibrium. While it is highly effective for analyzing the LM and LN alleles of the MN system, it cannot be used to determine the chronological age of a population. That requires different archaeological, historical, or advanced molecular dating methods.

65. (A) Group O
Epidemiological studies have suggested that individuals with blood group O may have certain survival advantages regarding specific infectious diseases. For example, some research indicates a lower risk of severe complications from malaria compared to other ABO groups. While the relationships between blood groups and infections are complex and still being studied, these associations provide insights into how natural selection shapes human genetics.

66. (D) 1, 2, and 3
Rh inheritance follows a Mendelian dominant pattern where the Rh-positive trait, driven by

helps anthropologists and geneticists study the genetic structure and evolutionary history of various human populations without the complications of dominance.

48. (A) P-3, Q-1, R-4, S-2
AB blood groups are universal recipients, while O groups are universal donors. The Rh factor is the primary cause of erythroblastosis fetalis in newborns. The MN system is a standard tool used in genetic research to test for Hardy-Weinberg equilibrium. These associations highlight the clinical, biological, and mathematical importance of various blood group systems in modern science and medicine.

49. (B) i
The allele 'i' in the ABO system is often called a null allele or an amorph because it does not produce a functional antigen on the red cell surface. While IA and IB alleles produce specific transferase enzymes to create antigens, the 'i' allele lacks this capability. This recessive nature defines the O phenotype when an individual inherits two copies of the allele.

50. (A) Isolated tribal populations
Anthropologists focus on isolated tribal populations because these groups often maintain unique genetic profiles due to long-term geographical and social isolation. Studying their ABO blood group distributions helps researchers understand human migration patterns, genetic drift, and the effects of natural selection. These populations provide a clearer genetic history compared to urban metropolitan areas where high levels of intermixing occur.

51. (C) Both M and N
The MN blood group system operates under the principle of codominance. If an individual inherits the LM allele from one parent and the LN allele from the other, their red blood cells will display both M and N antigens simultaneously. This results in the MN phenotype, which is distinct from the pure M or pure N phenotypes produced by homozygous genotypes.

52. (B) 2-1-3
The ABO system was the first to be discovered by Karl Landsteiner in 1900. This was followed by the discovery of the MN system by Landsteiner and Levine in 1927. Finally, the Rh system was identified by Landsteiner and Wiener in 1940. This chronological progression reflects the advancing techniques in hematology and the increasing understanding of human red cell antigens.

53. (A) Both A and R are true and R is the correct explanation of A.
Blood group studies are a fundamental part of anthropological research because they provide stable genetic markers for comparison. Unlike physical traits that can be influenced by the environment, blood group frequencies are determined solely by inheritance. This stability allows scientists to use frequency data to trace the historical relationships, migrations, and genetic evolution of human populations over many generations.

54. (B) Checking the donor's hair color
For a blood transfusion to be successful, medical professionals must match donor antigens with recipient antibodies and perform a cross-match to ensure compatibility. Factors like the donor's hair color are purely aesthetic and have no biological or clinical relevance to the success of the transfusion. The primary goal is to prevent a hemolytic reaction caused by incompatible red blood cell antigens.

55. (D) Group B
In the Indian subcontinent, blood group B is found in a notably high frequency compared to many other global regions. While group O is common worldwide, the high prevalence of the B antigen is a distinguishing characteristic of the genetic makeup of the Indian population. This distribution pattern is of significant interest to anthropologists studying the genetic history of the region.

56. (A) 1 and 2 only
A child with group AB must have one parent with the A allele and one with the B allele, making an O parent impossible. Similarly, a group O child needs two recessive alleles, which an AB parent cannot provide. However, blood groups can only exclude potential fathers; they cannot definitively identify a father, as many men share the same blood groups.

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antibodies, but recipients with group O have no A or B antigens for these antibodies to attack. In contrast, AB plasma contains no antibodies, making AB individuals the universal donors for plasma.

76. (D) 1, 2, and 3
The MN system is based on two antigens, M and N, and follows a clear Mendelian pattern of inheritance. It was discovered by Landsteiner and Levine in 1927. Because the alleles are codominant and the phenotypes are easily distinguished, the system has become a staple in human genetics for studying inheritance patterns and verifying the genetic structure of different human populations.

77. (C) Blood group AB
Individuals with blood group AB possess both A and B antigens on their red blood cells. To prevent an autoimmune reaction, their bodies do not produce antibodies against either of these antigens. This absence of anti-A and anti-B antibodies in the serum is what allows individuals with group AB to receive transfusions of red cells from any donor in the ABO system.

78. (A) P-2, Q-1, R-4, S-3
Blood group frequencies serve as markers for population studies. A high frequency of group B is common in many Indian tribes, while the absence of antigen A is a notable feature in some isolated South American tribes. Rare Rh-negative frequencies are observed in some Asian populations. Meanwhile, the MN distribution is a universal tool used by geneticists to study population genetic markers.

79. (A) RBC antigens require the absence of matching serum antibodies.
Landsteiner's Law states that if an antigen is present on a person's red blood cells, the corresponding antibody must be absent from their serum. Conversely, if an antigen is absent from the red cells, the corresponding antibody must be present in the serum. This fundamental principle ensures that an individual's immune system does not attack its own red blood cells in the ABO system.

80. (A) Both Statement I and Statement II are correct.
The Rh factor is an inherited protein found on the surface of red blood cells. An Rh-positive person already possesses the D antigen, so receiving Rh-negative blood—which lacks this antigen—will not trigger an immune reaction. This makes Rh-negative blood safe for Rh-positive recipients, although Rh-positive blood is never safe for sensitized Rh-negative recipients due to the risk of hemolysis.

81. (B) IAi
Blood group A can result from two different genotypes due to the dominance of the IA allele over the i allele. An individual can be homozygous (IAIA) or heterozygous (IAi). In both cases, the A antigen will be expressed on the red blood cells, resulting in the A phenotype. The presence of the recessive 'i' allele does not alter this expression.

82. (A) They possess both M and N antigens.
The MN phenotype is the result of codominant inheritance where the individual has one LM allele and one LN allele. In this state, both the M antigen and the N antigen are produced and displayed simultaneously on the surface of the red blood cells. Neither antigen masks the other, which is the defining characteristic of codominance in human blood group systems.

83. (A) Both A and R are true and R is the correct explanation of A.
People with blood group AB are universal recipients because their plasma naturally lacks both anti-A and anti-B antibodies. When they receive red blood cells from any ABO group, there are no antibodies present to recognize the donor antigens as foreign and trigger an attack. This biological trait ensures that transfused red cells can survive and function normally within the recipient's circulatory system.

84. (B) 0.36
In population genetics, the frequency of the recessive phenotype is equal to the square of the recessive allele's frequency. If the frequency of the 'i' allele is 0.6, the frequency of individuals with blood group O (genotype ii) is calculated by squaring 0.6. This mathematical operation yields a phenotypic frequency of 0.36, illustrating how allele frequencies determine the distribution of traits.

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85. (C) Determining the cause of death by poisoning
Blood grouping is a vital tool in forensic science for identifying suspects and resolving paternity disputes. However, it has no utility in determining the cause of death in cases involving poisoning. Toxicology and pathology are the specialized fields required to identify toxins and their physiological effects. Blood groups only provide genetic information about identity and biological relationships, not the circumstances of a death.

86. (A) 1 and 2 only
Rh inheritance follows dominant-recessive rules where Rh-positive (D) is dominant. Two heterozygous parents (Dd) have a twenty-five percent chance of passing two recessive alleles (dd) to their offspring, resulting in an Rh-negative child. However, two Rh-negative parents (dd) only possess recessive alleles and cannot produce an Rh-positive child, as they lack the dominant D allele necessary for that phenotype.

87. (D) B
Blood group B is remarkably prevalent in the Indian subcontinent, often being the most common blood type in various regional populations. This high frequency is so characteristic of the area that it is sometimes colloquially associated with the general population of India. This stands in contrast to many Western nations where blood group A or O is typically the most frequently occurring type.

88. (A) P-2, Q-1, R-4, S-3
ABO blood groups are determined by the presence of specific antigens on the red cell membrane. Group A has antigen A, group B has antigen B, and group AB has both antigens. Group O is unique because it lacks both A and B antigens entirely. These surface molecules are the targets for antibodies and define the compatibility rules for all blood transfusions.

89. (C) It fails to produce functional A or B antigens.
The allele 'i' is often described as an amorph because it is functionally silent; it does not lead to the production of the A or B antigens found in other groups. It is a recessive allele that only results in the O phenotype when an individual inherits it from both parents. Its presence is the foundation of the universal donor blood type.

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90. (A) Both Statement I and Statement II are correct.
The identification of the Rh system was a major breakthrough that explained why some transfusions failed even when ABO types were matched. It was discovered in 1940, well after the 1927 discovery of the MN system. Together, these discoveries provided a comprehensive understanding of human blood chemistry, significantly reducing the risks associated with medical procedures and maternal-fetal health complications.

91. (D) Antigen D
In clinical medicine, the term "Rh factor" specifically refers to the D antigen. Testing for this antigen determines whether an individual is classified as Rh-positive or Rh-negative. If the D antigen is detected on the red blood cells, the person is Rh-positive. Its absence indicates they are Rh-negative. This single antigen is the most important component of the Rh system.

92. (B) Absence of A, B, and D antigens
To be a true universal donor for all major systems, an individual's red blood cells must lack the A, B, and D (Rh) antigens. This combination, known as O negative, ensures that the donated blood will not be attacked by anti-A, anti-B, or anti-D antibodies in the recipient's plasma. This specific type is highly valued in emergency medicine for its safety.

93. (A) Both A and R are true and R is the correct explanation of A.
The MN blood group system is rarely used in clinical transfusion medicine because humans do not naturally possess antibodies against the M or N antigens. Without these antibodies, the risk of a transfusion reaction is extremely low, making compatibility testing for these antigens unnecessary in most medical procedures. Consequently, the system's primary importance remains in the fields of genetics and anthropology.

94. (D) LM LN
The MN blood group system is defined by the inheritance of two alleles, LM and LN. The genotype LMLN represents the heterozygous state where both alleles are present. Because these alleles are codominant, this specific genotype results in the MN phenotype, where both antigens

are expressed on the red cell surface. This is one of the three standard genotypes in the system.

95. (A) Group A or AB
A child with blood group A whose mother is group O must have inherited the A allele from their father. Since the mother (ii) can only provide an 'i' allele, the father must possess at least one IA allele. This means the biological father must have either blood group A (genotype IAIA or IAi) or blood group AB (genotype IAIB).

96. (D) 1, 2, and 3
Global blood group distributions show fascinating anthropological patterns. Native Americans have an exceptionally high frequency of group O, while group B is nearly absent in indigenous Australian populations. Additionally, the frequency of Rh-negative individuals is significantly higher in European populations compared to those of Asian descent. These variations are essential for understanding human genetic history, migration, and the impact of long-term isolation.

97. (B) Agglutination
Agglutination is the scientific term for the clumping of red blood cells that occurs when specific antigens on the cell surface react with corresponding antibodies. This reaction is the basis for most blood typing tests and is the primary danger in an incompatible blood transfusion. It differs from coagulation, which is the normal process of blood clotting to stop bleeding from wounds.

98. (A) P-3, Q-1, R-4, S-2
Human phenotypes for the MN and ABO systems are directly linked to their underlying genotypes. Phenotype M corresponds to genotype LMLM, phenotype N to LNLN, and phenotype MN to the heterozygous LMLN. In the ABO system, the O phenotype is the result of the homozygous recessive 'ii' genotype. Understanding these relationships is fundamental to studying human inheritance and population genetics.

99. (C) ABO and Rh typing of both donor and recipient
Before any blood transfusion, it is mandatory to perform ABO and Rh typing for both the donor and the recipient. This ensures that the donor's red blood cells are compatible with the recipient's immune system. Failure to match these groups can lead to a severe and potentially fatal hemolytic reaction. These tests are the most critical safety measures in modern transfusion medicine.

100. (D) Understanding genetic isolation and tribal migration.
For anthropologists, the distribution of blood groups in Indian tribes is a key for understanding genetic isolation and historical migration. Because many tribes have remained endogamous for centuries, their blood group frequencies reflect their unique genetic history. Analyzing these patterns allows researchers to trace how different groups moved through the subcontinent and how social structures have influenced the regional genetic landscape.

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Q. Experimental Method
R. Survey Method
S. Introspection
List II: (Key Characteristic)
1. Cause and effect relationship
2. Large scale data collection
3. Observing behavior in real-life settings
4. Examining one's own mental processes
Codes:
(A) P-3, Q-1, R-2, S-4
(B) P-1, Q-3, R-4, S-2
(C) P-3, Q-2, R-1, S-4
(D) P-4, Q-1, R-2, S-3

19. Which variable is manipulated by the researcher in an experiment to observe its effects?
(A) Dependent variable
(B) Control variable
(C) Independent variable
(D) Extraneous variable

20. Which of the following is NOT a limitation of the introspection method?
(A) It cannot be used with children or animals.
(B) It is private and cannot be verified by others.
(C) It is influenced by the reporter's bias.
(D) It provides data on conscious experiences.

21. Regarding the "Experimental Method", consider the following statements:
1. It involves the control of extraneous variables.
2. It allows for the establishment of causal relationships.
3. It relies exclusively on qualitative descriptions of behavior.
Which of the above statement(s) is/are correct?
(A) 1 and 2 only
(B) 2 and 3 only
(C) 1 and 3 only
(D) 1 only

22. Which school of psychology was founded by Wilhelm Wundt and focused on the basic elements of the mind?
(A) Functionalism
(B) Structuralism
(C) Behaviorism
(D) Gestalt

23. A researcher conducting a study on the effect of caffeine on memory performance uses memory score as the:
(A) Independent variable
(B) Confounding variable
(C) Controlled variable
(D) Dependent variable

24. In the following question, a statement of Assertion (A) is followed by a statement of Reason (R). Choose the correct option.
Assertion (A): In a correlation study, a researcher cannot conclude that one variable causes another.
Reason (R): Correlation only indicates the strength and direction of the relationship between variables.
(A) Both A and R are true and R is the correct explanation of A.
(B) Both A and R are true but R is not the correct explanation of A.
(C) A is true but R is false.
(D) A is false but R is true.

25. Which psychological method is most appropriate for obtaining information about the attitudes and opinions of a large population?
(A) Case study
(B) Experimental method
(C) Survey method
(D) Introspection

26. Which pair is correctly matched?
(A) Developmental Psychology – Life-span changes
(B) Clinical Psychology – Classroom dynamics study
(C) Health Psychology – Legal and criminal conduct
(D) Social Psychology – Biological basis of actions

27. Match the items in List I with those in List II and select the correct answer using the codes given below:
List I: (School)
P. Behaviorism
Q. Gestalt
R. Psychoanalysis
S. Functionalism
List II: (Key Concept)

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9. Regarding the goal of "Control" in psychology, consider the following statements:
1. It involves the modification of behavior to produce desired results.
2. It is often applied in therapeutic and educational settings.
3. It focuses solely on observing behavior without interference.

Which of the above statement(s) is/are correct?
(A) 1 and 3 only
(B) 2 and 3 only
(C) 1 and 2 only
(D) 3 only

10. Identify the INCORRECT statement regarding the goal of "Explanation" in psychology.
(A) Merely describes observed behavioral patterns
(B) Seeks to identify the underlying causes of behavior
(C) Develops formal theories to connect observed facts
(D) Systematically answers the "why" question of behavior

11. A psychologist who uses test scores to estimate how well a student will perform in college is pursuing which goal?
(A) Description
(B) Control
(C) Introspection
(D) Prediction

12. Arrange the following historical definitions of psychology in the correct chronological order:
1. Study of Behavior
2. Study of Soul
3. Study of Consciousness
4. Study of Mind

(A) 1-2-3-4
(B) 2-3-4-1
(C) 2-4-3-1
(D) 4-2-1-3

13. Which branch of psychology focuses on how people's thoughts, feelings, and behaviors are influenced by the actual or imagined presence of others?
(A) Health Psychology
(B) Clinical Psychology
(C) Social Psychology
(D) Developmental Psychology

14. Read the following statements and select the correct option.
Statement I: Industrial/Organizational psychology applies psychological principles to the workplace.
Statement II: It primarily focuses on diagnosing severe mental illnesses in corporate employees.
(A) Statement I is correct, Statement II is incorrect.
(B) Statement I is incorrect, Statement II is correct.
(C) Both statements are correct.
(D) Both statements are incorrect.

15. In the following question, a statement of Assertion (A) is followed by a statement of Reason (R). Choose the correct option.
Assertion (A): The introspection method was criticized for being highly subjective.
Reason (R): Different individuals often reported different experiences when exposed to the same stimulus.
(A) Both A and R are true and R is the correct explanation of A.
(B) Both A and R are true but R is not the correct explanation of A.
(C) A is true but R is false.
(D) A is false but R is true.

16. Which method involves the systematic study of an individual or a small group in great depth?
(A) Survey method
(B) Case study method
(C) Experimental method
(D) Naturalistic observation

17. In psychological research, what is the term for a tentative explanation or statement about the relationship between two or more variables?
(A) Theory
(B) Hypothesis
(C) Variable
(D) Correlation

18. Match the items in List I with those in List II and select the correct answer using the codes given below:
List I: (Method)
P. Naturalistic Observation

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CHAPTER 14
Introduction to Psychology

1. In its earliest historical context, psychology was most commonly defined as the study of which of the following?
(A) Human behavior
(B) The soul
(C) Mental processes
(D) Neural structures

2. Which aspect of psychology's methodology primarily supports its classification as a scientific discipline?
(A) Use of empirical observation
(B) Reliance on subjective intuition
(C) Focus on philosophical speculation
(D) Priority of anecdotal evidence

3. In the following question, a statement of Assertion (A) is followed by a statement of Reason (R). Choose the correct option.
Assertion (A): Psychology is considered a scientific discipline.
Reason (R): It employs systematic observation and experimental methods to study behavior and mental processes.
(A) Both A and R are true and R is the correct explanation of A.
(B) Both A and R are true but R is not the correct explanation of A.
(C) A is true but R is false.
(D) A is false but R is true.

4. Unlike philosophy, modern psychology relies predominantly on which of the following to derive its conclusions?
(A) Deductive reasoning alone
(B) Logic and rhetoric
(C) Pure contemplation
(D) Scientific verification

5. Which of the following best distinguishes psychology from physiology?
(A) Psychology focuses primarily on biological organ functions.
(B) Physiology studies how environmental factors influence social groups.
(C) Psychology emphasizes mental processes and behavior.
(D) Physiology focuses on the physical and chemical functions of the body.

6. Match the items in List I with those in List II and select the correct answer using the codes given below:
List I: (Branch)
P. Clinical Psychology
Q. Educational Psychology
R. Social Psychology
S. Industrial Psychology
List II: (Focus)
1. Group behavior and interaction
2. Psychological disorders and treatment
3. Workplace productivity and behavior
4. Learning processes and school settings
Codes:
(A) P-2, Q-4, R-1, S-3
(B) P-4, Q-2, R-3, S-1
(C) P-2, Q-1, R-4, S-3
(D) P-1, Q-3, R-2, S-4

7. Which statement accurately describes the modern scope of psychology?
(A) It focuses primarily on the treatment of physical diseases.
(B) It is limited to the behavioral observation of infants.
(C) It excludes the study of internal mental states.
(D) It encompasses human experience across the entire lifespan.

8. Which goal of psychology is being addressed when a researcher records the frequency of a specific behavior in a natural setting?
(A) Description
(B) Explanation
(C) Control
(D) Prediction

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1. Unconscious mind
2. Observable behavior
3. Adaptation of the mind
4. Perception of the "whole"

Codes:
(A) P-2, Q-4, R-1, S-3
(B) P-1, Q-2, R-3, S-4
(C) P-4, Q-3, R-2, S-1
(D) P-2, Q-1, R-4, S-3

28. Which branch of psychology explores the psychological factors related to physical health and illness?
(A) Social Psychology
(B) Health Psychology
(C) Clinical Psychology
(D) Industrial Psychology

29. Ethical guidelines in psychological research mandate that participants must be told the nature of the study before it begins. This is known as:
(A) Confidentiality
(B) Debriefing
(C) Informed consent
(D) Deception

30. Regarding the "Case Study Method", consider the following statements:
1. It provides rich, qualitative data.
2. Findings can be easily generalized to the entire population.
3. It is useful for studying rare psychological conditions.

Which of the above statement(s) is/are correct?
(A) 1 and 2 only
(B) 1 and 3 only
(C) 2 and 3 only
(D) 1 only

31. Wilhelm Wundt established the first formal laboratory for psychological research in which year?
(A) 1859
(B) 1879
(C) 1890
(D) 1905

32. Identify the correct chronological sequence of the emergence of these schools of psychology:
1. Behaviorism
2. Structuralism
3. Psychoanalysis
4. Gestalt Psychology

(A) 2-1-3-4
(B) 2-3-1-4
(C) 2-3-4-1
(D) 3-2-1-4

33. Which method is characterized by a face-to-face interaction where the researcher asks a series of questions to the participant?
(A) Observation
(B) Interview method
(C) Psychological testing
(D) Experimental method

34. Read the following statements and select the correct option.
Statement I: Naturalistic observation involves studying behavior in a controlled laboratory setting.
Statement II: It aims to capture behavior as it occurs in real-life without interference.
(A) Statement I is correct, Statement II is incorrect.
(B) Statement I is incorrect, Statement II is correct.
(C) Both statements are correct.
(D) Both statements are incorrect.

35. In the following question, a statement of Assertion (A) is followed by a statement of Reason (R). Choose the correct option.
Assertion (A): Ethics in research require maintaining the anonymity and privacy of the participants.
Reason (R): This ensures that the participants' personal data is not leaked to unauthorized individuals.
(A) Both A and R are true and R is the correct explanation of A.
(B) Both A and R are true but R is not the correct explanation of A.
(C) A is true but R is false.
(D) A is false but R is true.

36. Which school of psychology emphasizes the role of the unconscious mind in determining behavior?
(A) Functionalism
(B) Behaviorism

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This process is essential for advancing knowledge and refining various theoretical models.

18. (A) P-3, Q-1, R-2, S-4
Each research method offers unique advantages. Naturalistic observation captures behavior in real-life settings. Experiments are designed to establish cause-and-effect relationships by manipulating variables. Surveys allow for the collection of data from large populations efficiently. Introspection involves the self-examination of mental processes. Selecting the appropriate method depends on the researcher's goals and the nature of the specific phenomenon being investigated.

19. (C) Independent variable
In an experimental design, the researcher deliberately changes one specific factor to see how it influences another factor. This manipulated factor is known as the independent variable. By controlling this variable, the researcher can determine whether it causes a change in the outcome. This level of control is what distinguishes experimental research from other studies that only observe existing relationships.

20. (D) It provides data on conscious experiences.
The primary aim of introspection was to gain data regarding conscious experiences, which was its intended purpose rather than a drawback. However, the method faced significant limitations, such as its inability to be used with non-verbal subjects like infants or animals. Furthermore, it relied on private reports that could not be objectively verified, making the findings prone to personal bias.

21. (A) 1 and 2 only
The experimental method is characterized by the rigorous control of extraneous variables to isolate the effects of the independent variable. This control allows researchers to establish causal relationships between variables. While it can involve qualitative data, it primarily relies on quantitative measurements and statistical analysis. Therefore, the focus on control and causality makes it the gold standard for inquiry.

22. (B) Structuralism
Founded in the late nineteenth century, structuralism was the first formal school of thought in this field. Its proponents sought to analyze the adult mind in terms of the simplest definable components. By using the method of introspection, researchers attempted to discover the basic elements of consciousness and how these elements combine to form more complex experiences and mental structures.

23. (D) Dependent variable
In this research scenario, the memory score is the factor being measured to see how it is affected by the introduction of caffeine. This makes it the dependent variable. The caffeine intake is the independent variable being manipulated. By observing changes in the memory scores, the researcher can determine the impact of the caffeine, thereby identifying a potential relationship.

24. (A) Both A and R are true and R is the correct explanation of A.
Correlational studies measure the degree of relationship between two variables. While they can show that variables change together, they do not prove that one change causes the other. Other unmeasured factors could be influencing both. Therefore, the assertion is true because researchers cannot conclude causality from correlation alone, as the reason correctly identifies correlation only indicates relationship strength.

25. (C) Survey method
When researchers need to gather data from a large number of people regarding their beliefs, opinions, or attitudes, the survey method is most effective. It uses questionnaires or interviews to collect self-reported information from a representative sample. This approach allows for a broad overview of population trends and public sentiment, providing valuable data that would be difficult otherwise.

26. (A) Developmental Psychology – Life-span changes
Developmental psychology is the study of how people change physically, cognitively, and socially throughout their lives. This field examines growth and stability from infancy through old age. Other pairings, such as linking clinical psychology to classroom dynamics or health psychology to legal conduct, are incorrect because those topics

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45. Which of the following is a drawback of the survey method?
(A) High costs associated with sample data collection
(B) Restriction to controlled laboratory environments
(C) Respondents may provide inaccurate, desirable data
(D) Inability to gather data from broad populations

46. Which school of psychology is associated with the phrase "The whole is greater than the sum of its parts"?
(A) Structuralism
(B) Behaviorism
(C) Psychoanalysis
(D) Gestalt Psychology

47. A study that compares the reading ability of 5-year-olds, 10-year-olds, and 15-year-olds at the same time is using a:
(A) Cross-sectional design
(B) Longitudinal design
(C) Experimental design
(D) Case study design

48. Match the items in List I with those in List II and select the correct answer using the codes given below:
List I: (Variable/Term)
P. Independent Variable
Q. Dependent Variable
R. Extraneous Variable
S. Hypothesis
List II: (Definition)
1. Factor that is measured for change
2. Unwanted variable that might affect the result
3. Factor that is manipulated
4. A testable prediction
Codes:
(A) P-3, Q-1, R-2, S-4
(B) P-1, Q-3, R-4, S-2
(C) P-3, Q-2, R-1, S-4
(D) P-2, Q-4, R-3, S-1

49. Which early school of psychology used the method of "Introspection" to study the structure of the mind?
(A) Functionalism
(B) Structuralism
(C) Behaviorism
(D) Psychoanalysis

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50. In an experiment, the group that does not receive the experimental treatment is called the:
(A) Control group
(B) Experimental group
(C) Focus group
(D) Sample group

51. Regarding the "Observation Method", consider the following statements:
1. It can be naturalistic or controlled.
2. It suffers from the problem of observer bias.
3. It allows the researcher to manipulate the behavior being observed.
Which of the above statement(s) is/are correct?
(A) 1 and 2 only
(B) 1 and 3 only
(C) 2 and 3 only
(D) 3 only

52. Which goal of psychology is fulfilled when a therapist helps a client quit smoking through behavior modification?
(A) Behavioral description
(B) Behavioral explanation
(C) Behavioral prediction
(D) Behavioral control

53. Which branch of psychology is concerned with the assessment and treatment of mental illness and behavioral problems?
(A) Industrial Psychology
(B) Educational Psychology
(C) Clinical Psychology
(D) Social Psychology

54. Which of the following is an INCORRECT pair?
(A) Watson - Behaviorism
(B) Freud - Gestalt
(C) Wundt - Structuralism
(D) James - Functionalism

55. Psychology evolved from which two parent disciplines?
(A) Sociology and Biology
(B) Anthropology and Medicine
(C) Physics and Logic
(D) Philosophy and Physiology

56. The modern definition of psychology includes the study of:
(A) Both behavior and mental processes
(B) Overt behavior only
(C) Mental processes only
(D) Only the human soul

57. Which psychological method would be most useful for a detailed analysis of a person with a unique brain injury?
(A) Survey
(B) Experiment
(C) Case Study
(D) Correlation

58. Read the following statements and select the correct option.
Statement I: A standardized psychological test ensures that the test is administered and scored the same way every time.
Statement II: Reliability refers to the ability of a test to measure what it claims to measure.
(A) Statement I is correct, Statement II is incorrect.
(B) Statement I is incorrect, Statement II is correct.
(C) Both statements are correct.
(D) Both statements are incorrect.

59. Which school of psychology rejected the study of the mind and focused solely on observable actions?
(A) Structuralism
(B) Functionalism
(C) Gestalt Psychology
(D) Behaviorism

60. Which of the following is NOT one of the four main goals of psychology?
(A) Description
(B) Speculation
(C) Prediction
(D) Explanation

61. Which research method involves the selection of a representative sample from a larger population?
(A) Case study
(B) Introspection
(C) Survey method
(D) Naturalistic observation

62. What is the main disadvantage of a longitudinal research design?
(A) Inability to monitor longitudinal changes
(B) Use of different participants for all ages
(C) Failure to provide depth in qualitative data
(D) High resource costs and duration

63. Which method is being used when a researcher studies children's play behavior in a public park without their knowledge?
(A) Naturalistic Observation
(B) Controlled Observation
(C) Experimental Method
(D) Clinical Interview

64. Which of the following is a primary focus of Educational Psychology?
(A) Industrial workplace dynamics
(B) Classroom learning processes
(C) Severe psychological disorders
(D) Group dynamics in social life

65. Which school of psychology would investigate how a person's perception of a "melody" is more than just hearing individual notes?
(A) Behaviorism
(B) Gestalt Psychology
(C) Structuralism
(D) Functionalism

66. In a study titled "The effect of sleep deprivation on driving ability", sleep deprivation is the:
(A) Independent Variable
(B) Dependent Variable
(C) Controlled Variable
(D) Extraneous Variable

67. Which branch of psychology focuses on increasing employee productivity and improving the quality of work life?
(A) Clinical Psychology
(B) Educational Psychology
(C) Industrial Psychology
(D) Health Psychology

68. The "nature vs nurture" debate in psychology is most central to which area?
(A) I/O Psychology
(B) Clinical Psychology
(C) Health Psychology
(D) Developmental Psychology

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69. Which method of psychology was abandoned because it was not considered scientifically reliable for studying animals and infants?
(A) Observation
(B) Experiment
(C) Introspection
(D) Survey

70. Which of the following is an ethical requirement in research involving deception?
(A) Participants should never be told the truth.
(B) Participants must be debriefed after the study.
(C) Deception is prohibited under all circumstances.
(D) Researchers must share participant names with the public.

71. When a researcher finds that as stress increases, physical health decreases, this represents a:
(A) Positive correlation
(B) Zero correlation
(C) Causal relationship
(D) Negative correlation

72. Which goal of psychology involves identifying the conditions under which a behavior will occur in the future?
(A) Prediction
(B) Description
(C) Explanation
(D) Control

73. The primary difference between a structured and an unstructured interview is:
(A) Specific physical setting of session
(B) Total number of subjects interviewed
(C) Standardization level of questions
(D) Overall time duration of the session

74. Which school of psychology was established by William James?
(A) Functionalism
(B) Structuralism
(C) Behaviorism
(D) Psychoanalysis

75. Psychology is often called a "Hub Science" because its scope covers:
(A) Biological and physical interactions
(B) Purely abstract philosophical debates
(C) Strictly laboratory-based observations
(D) Broad range of human experiences

76. Which of the following is a limitation of the experimental method?
(A) Inability to determine causal relationships
(B) Low ecological validity in lab settings
(C) Total lack of control over extraneous factors
(D) Reliance on purely qualitative observation

77. Who is known as the "Father of Psychology"?
(A) Sigmund Freud
(B) John Watson
(C) Wilhelm Wundt
(D) William James

78. Which branch of psychology would be most interested in the relationship between stress and the immune system?
(A) Social Psychology
(B) Clinical Psychology
(C) Educational Psychology
(D) Health Psychology

79. A psychologist studying the development of language in infants over a period of three years is using:
(A) Longitudinal research
(B) Cross-sectional research
(C) Survey research
(D) Correlational research

80. Read the following statements and select the correct option.
Statement I: The goal of description in psychology is to answer "what" is happening.
Statement II: The goal of explanation is to answer "why" it is happening.
(A) Statement I is correct, Statement II is incorrect.
(B) Statement I is incorrect, Statement II is correct.
(C) Both statements are correct.
(D) Both statements are incorrect.

81. Which psychological school would most likely use a "free association" technique to explore the mind?
(A) Behaviorism
(B) Psychoanalysis
(C) Functionalism

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ANSWERS

1. (B) The soul
The term psychology originates from the Greek words psyche and logos. Historically, psyche was interpreted as the soul or spirit, while logos meant study or discourse. Consequently, early scholars defined the field as the study of the soul. This metaphysical focus eventually shifted toward the mind and behavior as the discipline adopted more scientific methodologies and empirical approaches.

2. (A) Use of empirical observation
Scientific disciplines rely on evidence gathered through direct experience or experimentation rather than personal intuition or speculation. By utilizing empirical observation, researchers can objectively measure and verify phenomena. This systematic approach allows for the replication of studies and the validation of theories, ensuring that conclusions are based on data that is observable and measurable in a consistent manner.

3. (A) Both A and R are true and R is the correct explanation of A.
Scientific status is granted to a field based on the rigorous application of the scientific method. This involves formulating hypotheses and testing them through systematic observation and experimentation. Because this discipline employs these standardized procedures to investigate behavior and mental processes, the assertion is accurate. The reason provided directly explains why the discipline qualifies as a scientific endeavor.

4. (D) Scientific verification
While philosophy relies heavily on logic, reasoning, and abstract contemplation to understand the human condition, modern psychology emphasizes empirical evidence. It uses scientific verification to test hypotheses and validate findings through experimentation and observation. This transition marks the shift from speculative inquiry to a data-driven discipline that requires objective proof and measurable results to support its various theoretical frameworks.

5. (C) Psychology emphasizes mental processes and behavior.
While both fields investigate human functioning, they focus on different aspects. Physiology is primarily concerned with the biological, physical, and chemical functions of living organisms and their parts. In contrast, this specific discipline focuses on understanding mental processes and behavior. It examines how individuals think, feel, and act, often considering the interaction between internal states and external environmental factors.

6. (A) P-2, Q-4, R-1, S-3
Different branches of this field address specific domains of human life. Clinical practitioners deal with mental health disorders and therapeutic treatments. Educational specialists focus on the learning environment and student development. Social researchers examine how individuals interact within groups. Industrial professionals apply principles to workplace behavior and productivity. These distinct categories ensure that psychological insights are applied effectively across diverse settings.

7. (D) It encompasses human experience across the entire lifespan.
The contemporary scope of this discipline is vast and inclusive. It is no longer limited to specific age groups or narrow behaviors. Instead, it encompasses the totality of human experience from conception through old age. This includes the study of cognitive, emotional, social, and physical changes over time, ensuring a comprehensive understanding of human development and functioning across the lifespan.

8. (A) Description
The initial step in any scientific investigation involves accurately detailing the phenomenon under study. By recording the frequency and nature of specific behaviors in their natural environment, researchers fulfill the goal of description. This process provides a clear and objective account of what is happening without

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95. Who is the founder of Behaviorism?
(A) John B. Watson
(B) Sigmund Freud
(C) B.F. Skinner
(D) Carl Rogers

96. A detailed study of a serial killer's life and psychological background is an example of:
(A) A survey
(B) A case study
(C) An experiment
(D) A correlation

97. Which of the following is a drawback of the experimental method?
(A) Cannot determine cause-effect
(B) Setting is often artificial
(C) Involves too many subjects
(D) Lacks experimental variables

98. Which school of psychology focuses on the "Whole" being different from the "Sum of parts"?
(A) Gestalt Psychology
(B) Structuralism
(C) Behaviorism
(D) Functionalism

99. In research, "Informed Consent" must be obtained:
(A) After the research is completed
(B) During the data analysis phase
(C) Prior to the start of the study
(D) Only when requested by subjects

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100. Which branch of psychology deals with the relationship between brain function and behavior?
(A) Social Psychology
(B) Industrial Psychology
(C) Educational Psychology
(D) Physiological Psychology

(D) Structuralism

82. In psychological testing, "Validity" refers to:
(A) Testing what it intends to measure
(B) Maintaining consistency of test results
(C) Assessing ease of test administration
(D) Calculating time required for completion

83. Which of the following is a correct statement regarding "Hypothesis"?
(A) It is a proven fact.
(B) It is used only in case studies.
(C) It is a tentative, testable statement.
(D) It is formulated after the results are announced.

84. Which field of psychology is most likely to advise a school on how to deal with bullying?
(A) Health Psychology
(B) Social Psychology
(C) Industrial Psychology
(D) Educational Psychology

85. Which method is most likely to be used to study the effect of a new teaching method on student performance?
(A) Case Study
(B) Naturalistic Observation
(C) Experimental Method
(D) Correlational Method

86. Which school of psychology was most interested in the "stream of consciousness"?
(A) Structuralism
(B) Functionalism
(C) Behaviorism
(D) Psychoanalysis

87. Which of the following is an example of a negative correlation?
(A) Increased study time vs. improved examination grades
(B) Increased physical height vs. higher body weight
(C) Zero relationship between shoe size and intelligence
(D) Lower room temperature vs. higher heater usage

88. Psychological research ethics prohibit which of the following?
(A) Compelling participation against a subject's will
(B) Disclosing the underlying purpose of research studies
(C) Offering compensation for the time of participants
(D) Utilizing validated and standardized psychological tests

89. Which variable remains constant throughout the experiment for both the experimental and control groups?
(A) Independent variable
(B) Dependent variable
(C) Controlled variable
(D) Hypothesis variable

90. The term "Psyche" in the word psychology originally meant:
(A) Soul
(B) Brain
(C) Behavior
(D) Science

91. Which research method is most vulnerable to "Social Desirability Bias"?
(A) Naturalistic observation
(B) Laboratory experiment
(C) Case study
(D) Survey method

92. Which branch of psychology studies how people act in large crowds?
(A) Clinical Psychology
(B) Social Psychology
(C) Developmental Psychology
(D) Health Psychology

93. Functionalism was more interested in:
(A) The "What" of the mind
(B) The "Unconscious" part of the mind
(C) The "How" and "Why" of the mind
(D) Only the "Observable" parts of behavior

94. Which of the following is NOT a characteristic of the scientific nature of psychology?
(A) Scientific objectivity
(B) Research replicability
(C) Internal systematicity
(D) Using common sense

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attempting to explain the underlying causes or manipulate variables to change the outcomes.

9. (C) 1 and 2 only
Control involves the intentional modification or management of behavior to achieve specific, beneficial outcomes. This goal is highly relevant in practical applications like therapy or education, where practitioners aim to reduce harmful actions or enhance learning. It is not about passive observation; rather, it requires active intervention to influence behavior in a predictable and desirable manner for improved well-being.

10. (A) Merely describes observed behavioral patterns
Explanation goes beyond the mere recording of behavioral patterns. While describing what occurs is a fundamental step, explaining involves identifying the underlying reasons and causal factors. This process requires the development of formal theories and hypotheses to understand why certain behaviors manifest. Merely stating that a behavior happened is a description, whereas providing the reason for its occurrence constitutes explanation.

11. (D) Prediction
Prediction involves using current information or past data to forecast future outcomes or behaviors. When psychologists utilize standardized test scores to estimate how a student might perform in a future academic environment, they are applying this specific goal. By identifying relationships between variables, they can make informed statements about the likelihood of certain events occurring under specific future conditions.

12. (C) 2-4-3-1
The historical development of this field saw several shifts in focus. Initially, it was defined as the study of the soul. As philosophical influences evolved, it became the study of the mind. Later, under structuralism, the focus moved to the study of consciousness. Finally, with the rise of behaviorism, it was redefined as the study of observable behavioral responses.

13. (C) Social Psychology
This branch examines how the thoughts, feelings, and actions of individuals are impacted by the presence of other people. It investigates topics such as social perception, group dynamics, and interpersonal relationships. By studying social influence, researchers gain insights into how the social environment shapes individual behavior, whether that presence is actual, imagined, or implied through cultural norms and expectations.

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14. (A) Statement I is correct, Statement II is incorrect.
Industrial and organizational psychology focuses on applying psychological principles to enhance workplace productivity and employee well-being. While it addresses employee behavior, it does not primarily involve diagnosing severe clinical mental illnesses, which is the domain of clinical psychology. Therefore, the first assertion correctly identifies the field's purpose, while the second assertion inaccurately describes its primary focus in corporate settings.

15. (A) Both A and R are true and R is the correct explanation of A.
Introspection involves looking inward to examine one's own conscious thoughts and feelings. This method was heavily criticized because it lacks objectivity. Since internal experiences are private, different people often report vastly different sensations when encountering the same stimulus. This variability makes it impossible to verify results externally, leading to the conclusion that the method is too subjective for research.

16. (B) Case study method
This research method involves an intensive, in-depth investigation of a single individual, a small group, or a specific event. It utilizes various data collection techniques, such as interviews and observations, to gather comprehensive information. This approach is particularly valuable for studying rare phenomena or complex clinical cases where detailed context is necessary to understand the unique characteristics involved.

17. (B) Hypothesis
A hypothesis is a specific, testable prediction about the relationship between two or more variables. It serves as a starting point for scientific investigation. Researchers formulate these tentative statements based on existing theories or observations and then design studies to determine if the data supports or refutes them.

(C) Structuralism
(D) Psychoanalysis

37. A longitudinal research design is best described as:
(A) Assessing various age cohorts at a single point
(B) Utilizing multiple observers for the same behavior
(C) Monitoring one group of subjects over time
(D) Sampling a broad cross-section of the population

38. Match the items in List I with those in List II and select the correct answer using the codes given below:
List I: (Scientist)
P. William James
Q. John B. Watson
R. Sigmund Freud
S. Max Wertheimer
List II: (School/Contribution)
1. Behaviorism
2. Functionalism
3. Gestalt Psychology
4. Psychoanalysis
Codes:
(A) P-2, Q-1, R-4, S-3
(B) P-1, Q-2, R-3, S-4
(C) P-4, Q-3, R-2, S-1
(D) P-3, Q-4, R-1, S-2

39. Which of the following is an example of an unstructured interview?
(A) Administering pre-set questions in a rigid sequence
(B) Utilizing computerized surveys with fixed-choice options
(C) Determining scores strictly via a standardized manual
(D) Adopting a flexible, conversational style for answers

40. What is the primary purpose of a "Psychological Test"?
(A) Quantifying individual variations in mental traits
(B) Diagnosing specific physical or medical ailments
(C) Determining the socioeconomic status of a subject
(D) Manipulating the specified independent variable

41. Regarding "Correlation Method", consider the following statements:
1. A positive correlation means as one variable increases, the other also increases.
2. A correlation coefficient of zero indicates a strong relationship.
3. Correlation does not imply that one variable causes the change in another.
Which of the above statement(s) is/are correct?
(A) 1 and 2 only
(B) 2 and 3 only
(C) 1 and 3 only
(D) 2 only

42. In which type of research is the investigator unable to manipulate variables but seeks to determine the relationship between them?
(A) Correlational research
(B) Experimental research
(C) Case study
(D) Introspection

43. Which branch of psychology is most likely to study how memory and thinking processes change as an individual grows from childhood to old age?
(A) Social Psychology
(B) Educational Psychology
(C) Industrial Psychology
(D) Developmental Psychology

44. In the following question, a statement of Assertion (A) is followed by a statement of Reason (R). Choose the correct option.
Assertion (A): Functionalism was interested in how the mind helps organisms adapt to their environment.
Reason (R): William James was heavily influenced by Charles Darwin's theory of evolution.
(A) Both A and R are true and R is the correct explanation of A.
(B) Both A and R are true but R is not the correct explanation of A.
(C) A is true but R is false.
(D) A is false but R is true.

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fall under educational and forensic psychology. Accurate pairing is essential for specialization.

27. (A) P-2, Q-4, R-1, S-3
Behaviorism focuses on observable actions and environmental stimuli. Gestalt psychology emphasizes that perception involves seeing the whole rather than just individual parts. Psychoanalysis explores the influence of the unconscious mind on behavior. Functionalism is concerned with how mental processes help individuals adapt to their environment. These foundational concepts define the different theoretical perspectives that have shaped the history of the field.

28. (B) Health Psychology
This branch investigates how biological, social, and psychological factors influence health and illness. Professionals in this field study why people make certain health choices and how they cope with chronic conditions. They also design interventions to encourage healthy behaviors, such as exercise and stress management, aiming to improve overall well-being and the effectiveness of healthcare delivery and outcomes.

29. (C) Informed consent
Ethical research requires that participants are fully aware of what the study involves before they agree to take part. This process ensures that individuals can make a voluntary and informed decision about their participation. It includes explaining the purpose, duration, and procedures of the research, as well as any potential risks or benefits, thereby protecting the rights and autonomy of participants.

30. (B) 1 and 3 only
Case studies provide rich, detailed qualitative data about a subject, making them ideal for investigating rare or complex psychological conditions. However, a significant limitation is that findings are based on a very small sample size, often just one individual. Consequently, these results cannot be easily generalized to the broader population, as the specific circumstances may not be universally applicable.

31. (B) 1879
The establishment of the first formal laboratory for psychological research in 1879 at the University of Leipzig is widely considered the birth of psychology as an independent scientific discipline. Before this, the study of the mind was primarily a branch of philosophy. By creating a dedicated space for experimental research, Wilhelm Wundt provided the foundation for systematic, empirical investigation.

32. (C) 2-3-4-1
The historical progression began with structuralism in the late 1800s, which focused on the elements of consciousness. Psychoanalysis emerged shortly after, emphasizing the unconscious. Gestalt psychology then arose in the early 1900s as a reaction against structuralism. Finally, behaviorism became dominant in the mid-twentieth century by rejecting the study of the mind in favor of observable, measurable behavioral responses.

33. (B) Interview method
This method involves a direct interaction where a researcher asks questions and a participant provides verbal responses. It can range from highly structured formats with specific questions to unstructured, conversational styles. This approach allows the researcher to gather detailed personal information, observe non-verbal cues, and clarify answers, providing a depth of insight often not possible with written questionnaires.

34. (B) Statement I is incorrect, Statement II is correct.
Naturalistic observation is specifically conducted in real-world settings to capture behavior as it naturally occurs. It avoids the artificiality of a laboratory environment. Therefore, the first statement is incorrect because it describes a controlled setting, while the second statement accurately reflects the goal of observing subjects in their normal surroundings without any manipulation or interference by the researcher.

35. (A) Both A and R are true and R is the correct explanation of A.
Maintaining participant anonymity and privacy is a fundamental ethical requirement in research. This practice involves ensuring that individual data cannot be linked back to the specific participant and is kept secure. The assertion is true, and the reason correctly explains that these measures are necessary to protect sensitive

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predictable pattern between the two factors, although it does not prove that stress is the direct cause of the declining physical health.

72. (A) Prediction
Prediction involves using current data and established relationships between variables to estimate when and how a behavior will occur in the future. By understanding these patterns, psychologists can forecast outcomes under specific circumstances. This goal is vital for developing effective interventions and helping individuals prepare for or avoid certain situations based on the likelihood of their future behavioral responses.

73. (C) Standardization level of questions
The primary distinction lies in the level of standardization and consistency in the questions asked. A structured interview uses a fixed set of questions in a specific order, ensuring every participant has the same experience. An unstructured interview is more flexible and conversational, allowing the researcher to adapt the questions to each individual's responses. This difference affects overall data comparability.

74. (A) Functionalism
William James founded functionalism as a reaction to the structuralist focus on the elements of the mind. He was more interested in how mental processes function to help individuals adapt to their environment. This perspective emphasized the stream of consciousness and the practical application of psychological findings to everyday life, influencing the development of various applied fields within the discipline.

75. (D) Broad range of human experiences
Psychology is often called a hub science because its findings and methods are relevant to many other fields, such as medicine, education, and sociology. Its broad scope covers almost every aspect of human experience, from the biological underpinnings of the brain to the complex social interactions of large groups. This central position allows it to connect knowledge across disciplines.

76. (B) Low ecological validity in lab settings
One significant drawback of experiments conducted in controlled laboratory settings is their potential lack of ecological validity. Because the environment is artificial, participants may behave differently than they would in real-life situations. This makes it challenging to generalize findings to everyday life, where many uncontrolled variables are present. Researchers must carefully consider how these laboratory results apply to natural settings.

77. (C) Wilhelm Wundt
Wilhelm Wundt is honored with this title because he established the first laboratory dedicated to psychological research in 1879. By applying scientific methods to the study of the mind, he helped separate the field from philosophy and established it as a formal academic discipline. His work on structuralism and introspection paved the way for future generations of psychological scientists.

78. (D) Health Psychology
Health psychologists are specifically interested in the bidirectional relationship between psychological states and physical health. They study how factors like chronic stress can suppress the immune system and increase vulnerability to illness. By understanding these links, they develop strategies to manage stress and promote healthier lifestyles, ultimately improving both mental and physical outcomes for individuals facing health challenges.

79. (A) Longitudinal research
This study follows the same group of infants as they grow, making it a longitudinal research design. By observing the same children at different ages, the researcher can track the actual progression of language development within those individuals. This approach provides a clear picture of how development unfolds over time and helps identify the factors that contribute to individual differences.

80. (C) Both statements are correct.
The goal of description is to provide a factual and detailed account of a behavior or mental process, answering "what" is happening. The goal of explanation is to identify the underlying causes and reasons for that behavior, answering the "why." Both goals are essential for a complete scientific understanding, as description provides data while explanation provides theory.

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perspective was deeply rooted in evolutionary theory, which emphasized survival and adaptation. William James applied these biological concepts to the mind. The assertion correctly identifies this focus, and the reason accurately explains the influence of Darwinian evolution on James's work.

45. (C) Respondents may provide inaccurate, desirable data
A major limitation of surveys is their reliance on self-reported information. Respondents may consciously or unconsciously provide inaccurate answers to appear more favorable, a phenomenon known as social desirability bias. Additionally, poor memory or misunderstanding of questions can further compromise accuracy. These factors can lead to misleading conclusions if the researcher does not account for potential reporting biases in results.

46. (D) Gestalt Psychology
This principle is the cornerstone of Gestalt psychology. It suggests that our perception of a stimulus is not just the result of adding up its individual sensory components. Instead, we perceive organized patterns and wholes that have their own unique characteristics. This approach highlights the importance of context and the brain's natural tendency to organize information into meaningful, integrated structures.

47. (A) Cross-sectional design
This research design involves comparing different groups of people who vary in age at a single point in time. By studying multiple age cohorts simultaneously, researchers can identify differences related to age without having to follow the same individuals for many years. This method is efficient and provides a snapshot of developmental differences, although it may be influenced by effects.

48. (A) P-3, Q-1, R-2, S-4
In an experiment, the independent variable is the factor the researcher manipulates, while the dependent variable is the outcome being measured. Extraneous variables are uncontrolled factors that might influence the results. A hypothesis is the tentative prediction that the study aims to test. Correctly identifying these components is essential for designing valid research and interpreting the findings accurately within science.

49. (B) Structuralism
This early school of thought aimed to break down conscious experience into its basic components, much like a chemist analyzes matter. Proponents used introspection, requiring trained participants to describe their internal sensations and feelings in response to stimuli. By identifying these fundamental structures, they hoped to understand how the mind is organized. This approach laid the groundwork for future experimental study.

50. (A) Control group
In an experiment, the control group serves as a baseline for comparison. Participants in this group are treated identically to those in the experimental group, except they do not receive the independent variable or treatment being tested. This allows researchers to determine if changes in the experimental group are actually caused by the treatment rather than by other outside factors.

51. (A) 1 and 2 only
Observation can take place in natural environments or controlled laboratory settings. A significant challenge is observer bias, where the researcher's expectations might influence what they record. Unlike experimental methods, observation generally does not involve manipulating the behavior being studied; instead, it focuses on recording actions as they occur. Therefore, maintaining objectivity is critical for the validity of the data.

52. (D) Behavioral control
When psychological principles are applied to help an individual change or stop a specific behavior, the goal being pursued is control. In this context, control refers to the intentional intervention and management of behavioral patterns to achieve a desired and healthy result. By using techniques like behavior modification, practitioners actively influence and shape outcomes to improve the individual's life quality.

53. (C) Clinical Psychology
This specialized branch focuses on diagnosing and treating individuals with psychological

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disorders and behavioral problems. Clinical psychologists work in various settings, such as hospitals and private practices, providing therapy and interventions. They use evidence-based methods to help people manage conditions like depression and anxiety, aiming to improve mental health and promote effective functioning in daily life and relationships.

54. (B) Freud - Gestalt
Sigmund Freud is the founder of psychoanalysis, not Gestalt psychology. Gestalt psychology was pioneered by figures like Max Wertheimer and focuses on perception and the whole experience. The other pairs are correct: John B. Watson is associated with behaviorism, Wilhelm Wundt with structuralism, and William James with functionalism. Misidentifying these founders can lead to misunderstandings of theoretical frameworks.

55. (D) Philosophy and Physiology
This field emerged from the intersection of two distinct areas of study. Philosophy provided the early questions about the nature of the mind, soul, and human knowledge. Physiology contributed the scientific methods and understanding of biological processes and the nervous system. The integration of philosophical inquiry with physiological experimentation eventually led to the development of psychology as an independent discipline.

56. (A) Both behavior and mental processes
The contemporary definition of this science is comprehensive, covering both what people do and what they think. Behavior refers to any observable and measurable action, while mental processes include internal experiences like thoughts, emotions, and memories. By studying both, researchers can gain a complete understanding of the human experience, recognizing that external actions are often driven by internal states.

57. (C) Case Study
When a researcher encounters a rare or unique situation, such as a specific type of brain injury, the case study method is the most appropriate approach. This allows for an intensive and detailed examination of the individual's experiences and functioning. The depth of information gathered from a single case can provide valuable insights that might lead to new scientific hypotheses.

58. (A) Statement I is correct, Statement II is incorrect.
Standardization ensures that a test is given and scored consistently across different sessions and participants, making the first statement correct. However, the second statement is incorrect because it describes validity, not reliability. Reliability refers to the consistency and stability of the results over time. A test must be both reliable and valid to be considered a high-quality instrument for measurement.

59. (D) Behaviorism
Behaviorism revolutionized the field by arguing that psychology should be an objective science focused only on observable behavior. Its proponents rejected the study of internal mental states, such as thoughts and feelings, as they could not be directly measured. Instead, they investigated how environmental stimuli and reinforcement shape behavior, leading to significant advancements in learning theory and behavioral therapy applications.

60. (B) Speculation
The four primary objectives of this scientific discipline are to describe, explain, predict, and control behavior and mental processes. Speculation, which involves making guesses without empirical evidence, is contrary to the scientific nature of the field. By adhering to these goals, researchers ensure that their work is based on objective observation and rigorous testing rather than personal opinions.

61. (C) Survey method
The survey method typically involves selecting a smaller group of people, known as a sample, that reflects the characteristics of a larger population. By questioning this representative sample, researchers can generalize their findings to the entire group. This technique is highly efficient for gathering data on a wide range of topics, provided the sample is chosen carefully to avoid bias.

62. (D) High resource costs and duration
While longitudinal studies provide valuable data on how individuals change over time, they

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are extremely time-consuming and expensive to conduct. Researchers must maintain contact with the same participants for years or even decades. Additionally, there is a high risk of participant attrition, where people drop out of the study, which can bias the results and reduce overall sample size.

63. (A) Naturalistic Observation
This scenario is a classic example of naturalistic observation, where subjects are studied in their everyday environment without any interference from the researcher. By remaining unobtrusive and observing behavior as it naturally unfolds, researchers can gain a more authentic understanding of social interactions and behaviors that might be altered if the subjects knew they were being watched in labs.

64. (B) Classroom learning processes
This branch of the field is dedicated to understanding how people learn and the most effective ways to teach them. Educational psychologists study various factors that influence the learning process, including student motivation, classroom environment, and instructional design. Their goal is to apply psychological principles to improve educational outcomes and support the academic and emotional development of students.

65. (B) Gestalt Psychology
A Gestalt psychologist would be particularly interested in how we perceive a melody as a single, unified experience rather than just a series of isolated sounds. This reflects the core belief that the human mind organizes sensory information into meaningful wholes. By studying these perceptual patterns, researchers can understand how our brains construct a coherent reality from sensory input.

66. (A) Independent Variable
In this research, sleep deprivation is the factor that the investigator is manipulating or varying to observe its effect on an outcome. Therefore, it is the independent variable. The resulting driving ability, which is being measured, is the dependent variable. This experimental setup allows the researcher to test whether changes in sleep levels directly lead to changes in driving performance.

67. (C) Industrial Psychology
Often referred to as I/O psychology, this branch focuses on applying psychological concepts to the workplace. Professionals in this field work to improve employee selection, training, and performance appraisal systems. They also study organizational culture and leadership to enhance productivity and worker satisfaction. By optimizing the interaction between people and their work environments, they help organizations function more effectively.

68. (D) Developmental Psychology
The debate over whether genetics or environment has a greater impact on human development is a central theme in this branch. Researchers investigate how inherited traits interact with life experiences to shape a person's growth. This understanding is crucial for explaining individual differences in personality, intelligence, and behavior from infancy through adulthood, highlighting the complex interplay between biology and upbringing.

69. (C) Introspection
Introspection was discarded as a scientific method because it required subjects to verbally report their internal thoughts and sensations. This made it impossible to use with infants or animals who cannot speak. Furthermore, the inherent subjectivity and lack of external verification led early behaviorists to reject it in favor of more objective, observable methods that could be applied across species.

70. (B) Participants must be debriefed after the study.
While some studies require temporary deception to prevent participants from altering their behavior, ethical guidelines mandate a thorough debriefing afterward. During this process, the researcher must explain the true purpose of the study and the reasons for using deception. This ensures that participants are not left with any misconceptions or negative feelings, maintaining the integrity and ethical standards of research.

71. (D) Negative correlation
A negative correlation occurs when two variables move in opposite directions. In this case, as the level of one variable (stress) goes up, the level of the other variable (physical health) goes down. This statistical relationship indicates a

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personal information, thereby fostering trust and encouraging honest participation in studies.

36. (D) Psychoanalysis
This school of thought, developed by Sigmund Freud, emphasizes the powerful influence of the unconscious mind on human behavior and personality. It suggests that many of our actions, thoughts, and feelings are driven by hidden desires and past experiences that we are not consciously aware of. Techniques like dream analysis and free association are used to explore these deep processes.

37. (C) Monitoring one group of subjects over time
This research design involves following the same group of participants over an extended period. By assessing the same individuals at multiple points in time, researchers can observe how specific traits or behaviors develop and change. This approach is particularly useful for studying long-term trends, such as the effects of aging or the impact of early childhood experiences on outcomes.

38. (A) P-2, Q-1, R-4, S-3
William James is associated with functionalism, focusing on the purpose of mental processes. John B. Watson founded behaviorism, emphasizing observable actions. Sigmund Freud developed psychoanalysis to explore the unconscious mind. Max Wertheimer was a leading figure in Gestalt psychology, highlighting the holistic nature of perception. These individuals pioneered distinct perspectives that provided the theoretical foundations for many modern approaches.

39. (D) Adopting a flexible, conversational style for answers
An unstructured interview is characterized by its flexibility and lack of a rigid format. Unlike structured interviews that follow a set sequence of pre-determined questions, this approach allows the conversation to flow naturally based on the participant's responses. The researcher can ask follow-up questions and explore topics in depth, making it a valuable tool for gathering rich, qualitative information.

40. (A) Quantifying individual variations in mental traits
The main objective of these tests is to provide an objective and standardized measure of specific mental traits or behaviors. By using these instruments, researchers and practitioners can quantify individual differences in areas such as intelligence, personality, or aptitude. This allows for comparisons between individuals or groups and helps in making informed decisions in clinical, educational, or organizational settings.

41. (C) 1 and 3 only
A positive correlation indicates that as one variable increases, so does the other. It is also true that correlation does not establish causation; it merely shows that a relationship exists. However, a correlation coefficient of zero signifies the absence of a relationship, not a strong one. Therefore, understanding the direction and strength of these relationships is crucial for interpreting data.

42. (A) Correlational research
In correlational research, the investigator observes and measures the relationship between two or more naturally occurring variables without interfering or manipulating them. This method is used when experimental manipulation is unethical or impossible. While it can identify patterns and associations, it cannot definitively determine cause-and-effect relationships, as researchers cannot control for all potential confounding factors in non-experimental settings.

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43. (D) Developmental Psychology
This branch is dedicated to understanding how people grow and change throughout their entire lives. It covers physical, cognitive, social, and emotional development across all ages. Researchers in this area might study how memory functions in toddlers compared to elderly adults or how thinking processes evolve as a person matures, providing insights into the continuity and change of human life.

44. (A) Both A and R are true and R is the correct explanation of A.
Functionalism sought to understand the purpose and function of mental processes in helping humans adapt to their surroundings. This

81. (B) Psychoanalysis
This technique was a central part of Sigmund Freud's psychoanalytic therapy. It involves asking patients to speak freely about whatever comes to mind without censorship. The goal is to uncover hidden thoughts, feelings, and memories from the unconscious mind that may be influencing the person's current behavior or psychological distress. This process helps the therapist gain internal insight.

82. (A) Testing what it intends to measure
Validity is a crucial characteristic of a good psychological test. It refers to the extent to which the instrument actually measures the specific trait or construct it is designed to assess. For example, an intelligence test is valid if it truly measures intelligence rather than just reading ability. Without high validity, a test's results are not meaningful for their purpose.

83. (C) It is a tentative, testable statement.
A hypothesis is not an established fact; rather, it is a tentative and testable prediction about how variables might be related. It is formulated before the research begins and serves to guide the study's design. By gathering and analyzing data, researchers can determine whether the evidence supports their hypothesis, allowing for the refinement of theories and creation of knowledge.

84. (D) Educational Psychology
Educational psychologists are often called upon to advise schools on social and behavioral issues that affect learning, such as bullying. They apply their knowledge of child development and group dynamics to create safer school environments and develop effective intervention programs. By working with students and teachers, they help foster a positive school culture that supports the well-being of all.

85. (C) Experimental Method
To determine the effectiveness of a new teaching method, the experimental method is most appropriate. A researcher can manipulate the teaching style (independent variable) and measure the impact on student performance (dependent variable) while controlling for other factors. This approach allows for a clear comparison between groups and helps establish whether the new method actually causes the observed improvement.

86. (B) Functionalism
William James, the leading functionalist, famously described consciousness as a continuous, ever-changing "stream" rather than a set of discrete elements. He believed that trying to break it down into parts, as structuralists did, would distort its true nature. This focus on the holistic and functional aspects of the mind helped shift the field toward a dynamic understanding of experience.

87. (D) Lower room temperature vs. higher heater usage
This scenario demonstrates a negative correlation because the two variables move in opposite directions. As the room temperature decreases, the usage of the heater typically increases to compensate. This predictable relationship shows that an increase in one factor is associated with a decrease in the other, which is the defining characteristic of a negative correlation in statistical research.

88. (A) Compelling participation against a subject's will
One of the most fundamental ethical rules in research is that participation must be voluntary. It is strictly prohibited to force or coerce anyone into taking part in a study against their will. Individuals have the right to decline participation or withdraw from a study at any time without any negative consequences, protecting their autonomy and dignity throughout the process.

89. (C) Controlled variable
In an experiment, it is essential to keep all factors identical between the experimental and control groups except for the independent variable being tested. These constant factors are called controlled variables. By ensuring these remain unchanged, researchers can be more confident that any differences observed in the dependent variable are truly caused by the manipulation of the independent variable tested.

90. (A) Soul
The term psychology is derived from the Ancient Greek words psyche, meaning soul or breath of life, and logos, meaning the study or branch

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CHAPTER 15
Heredity and Environment

1. Which of the following best defines heredity in the context of human development?
(A) Total sum of various behavioral characteristics acquired through the social environment.
(B) Biological transmission of physical and mental traits from parents to offspring.
(C) Impact of specific educational interventions on a child's overall cognitive growth.
(D) Process involving gradual adaptation of individuals to their cultural surroundings.

2. How many total chromosomes are typically found in a single somatic cell of a healthy human being?
(A) 23
(B) 44
(C) 46
(D) 48

3. Read the following statements and select the correct option regarding the nature vs nurture debate:
Statement I: "Nature" refers to the genetic blueprint and biological factors an individual is born with.
Statement II: "Nurture" encompasses all external influences including family, culture, and education.
(A) Statement I is correct, but Statement II is incorrect.
(B) Statement II is correct, but Statement I is incorrect.
(C) Both Statement I and Statement II are correct.
(D) Neither Statement I nor Statement II is correct.

4. Read the assertion and reason statements carefully and select the correct option.
Assertion (A): Genes are considered the basic functional and physical units of heredity.
Reason (R): Genes are composed of DNA and act as instructions to make molecules called proteins.
(A) Both A and R are true and R is the correct explanation of A.
(B) Both A and R are true but R is not the correct explanation of A.
(C) A is true but R is false.
(D) A is false but R is true.

5. Which of the following statements regarding the "Environment" is INCORRECT?
(A) It includes the internal environment of the mother's womb during pregnancy.
(B) It plays a critical role in determining how genetic potential is expressed.
(C) It refers only to the physical surroundings like climate and geography.
(D) It includes social, cultural, and economic factors influencing a child.

6. Which of the following is a correctly matched pair of Mendelian principles?
(A) Law of Segregation — Genes for different traits are always inherited together.
(B) Law of Dominance — One allele can mask the expression of another.
(C) Law of Independent Assortment — Alleles only separate during mitosis.
(D) Law of Recessiveness — Dominant traits are only expressed in homozygous pairs.

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7. Match List I with List II and select the correct answer using the codes given below:
List I: (Research Method)
P. Twin Studies
Q. Adoption Studies
R. Family Studies
S. Longitudinal Studies
List II: (Description)
1. Compares individuals living in the same household to assess trait clustering.
2. Compares biological and adoptive parents to separate genetic and environmental effects.

100. (D) Physiological Psychology

Also known as biological psychology or behavioral neuroscience, this branch investigates the biological and physical foundations of behavior and mental processes. Researchers in this field study how the brain, nervous system, and hormones influence how we think, feel, and act. By understanding these physiological mechanisms, they can identify the biological roots of both normal behavior and various psychological disorders.

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of knowledge. Therefore, the original meaning was the study of the soul. Over time, the focus of the discipline has shifted toward the mind and behavior, reflecting a more modern and scientific approach to humanity.

91. (D) Survey method
Because surveys rely on self-reported data, they are highly susceptible to social desirability bias. This occurs when participants provide answers that they believe will make them look better or align with social norms, rather than being completely honest. This can particularly affect sensitive topics like illegal behavior, leading researchers to potentially draw inaccurate conclusions from the gathered population data.

92. (B) Social Psychology
This field explores how social contexts and the presence of others influence individual and group behavior. This includes studying phenomena like crowd dynamics, mob behavior, and social contagion. By understanding these processes, social psychologists can explain why people often act differently when they are part of a large group than they would when alone, providing insights into social influence.

93. (C) The "How" and "Why" of the mind
Rather than just focusing on the basic components of the mind, functionalists were more interested in understanding how mental processes work and why they exist. They wanted to know the purpose of consciousness and how it helps organisms solve problems and survive in their environment. This practical and evolutionary focus set functionalism apart from the earlier analytical approach of structuralism.

94. (D) Using common sense
While common sense is based on everyday intuition and subjective experience, science relies on objective evidence, systematic observation, and replicability. Scientific findings in this field often contradict common sense beliefs, which can be inconsistent and biased. By following rigorous research methods, psychologists ensure that their conclusions are reliable and valid, moving beyond simple intuition to an accurate understanding of behavior.

95. (A) John B. Watson
John B. Watson is credited with establishing behaviorism as a major school of thought in the early twentieth century. He argued that for the field to be a true science, it must abandon the study of the mind and focus only on observable actions and environmental responses. His influential work set the stage for decades of research on learning.

96. (B) A case study
Investigating the unique life history and psychological makeup of a single person, such as a serial killer, is a clear example of a case study. This method allows researchers to gather a massive amount of detailed and contextual information that would be impossible to obtain through more general research methods, providing a deep understanding of unique behavioral factors.

97. (B) Setting is often artificial
A major disadvantage of the experimental method is that it often takes place in an artificial, controlled laboratory setting. While this allows for precise control over variables, it can create an environment that does not reflect real-world conditions. Consequently, participants may not act naturally, and results may not be easily generalized to complex, everyday situations where many variables interact.

98. (A) Gestalt Psychology
This foundational idea in Gestalt psychology suggests that human perception is an active process of organizing sensory information into meaningful patterns. We do not just see a collection of individual parts; instead, we perceive integrated wholes that have their own distinct qualities. This approach has had a lasting impact on our understanding of how the brain processes information and consciousness.

99. (C) Prior to the start of the study
Ethical guidelines require that informed consent be obtained from participants before any research activities begin. This ensures that individuals have all the necessary information to make an autonomous and voluntary decision about whether to participate. It is a fundamental protection that respects the rights of the subjects and maintains the ethical integrity of the entire psychological research process.

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3. Compares Monozygotic and Dizygotic pairs to estimate heritability.
4. Tracks the same individuals over a long period to observe development.

(A) P-1, Q-4, R-3, S-2
(B) P-2, Q-3, R-4, S-1
(C) P-4, Q-1, R-2, S-3
(D) P-3, Q-2, R-1, S-4

8. A child inherits a high genetic potential for height but suffers from severe malnutrition during early childhood, resulting in stunted growth. This scenario best illustrates:
(A) The interaction between heredity and environment.
(B) The absolute dominance of genotype over phenotype.
(C) The role of purely random mutations in development.
(D) The concept of Mendelian segregation in physical traits.

9. Which of the following is NOT typically classified as a component of the postnatal environment?
(A) Peer group interactions
(B) Quality of schooling
(C) Maternal nutrition during gestation
(D) Socioeconomic status of the family

10. Consider the following statements about DNA:
1. It stands for Deoxyribonucleic Acid.
2. It is organized into structures called chromosomes.
3. It contains the genetic instructions for the development and functioning of living organisms.

Which of the above statement(s) is/are correct?
(A) 1 and 2 only
(B) 2 and 3 only
(C) 1 and 3 only
(D) 1, 2, and 3

11. Which of the following statements is true regarding dominant and recessive traits?
(A) Recessive traits are expressed even if only one allele is present.
(B) Dominant traits require two identical alleles to be expressed.
(C) Dominant traits are always more beneficial for survival than others.
(D) Recessive traits are expressed only in a homozygous genetic state.

12. Select the correct sequence of biological units from the smallest/most specific to the largest/most complex:
(A) DNA → Gene → Chromosome → Nucleus
(B) Nucleus → Chromosome → Gene → DNA
(C) Gene → DNA → Nucleus → Chromosome
(D) Chromosome → Gene → DNA → Nucleus

13. What is the technical term for an individual's observable characteristics, such as eye color or height, resulting from the interaction of genetics and environment?
(A) Genotype
(B) Allele
(C) Phenotype
(D) Gamete

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14. Read the assertion and reason statements carefully and select the correct option.
Assertion (A): Identical twins (monozygotic) are often used in psychological research to study heritability.
Reason (R): Identical twins share 100% of their genetic material, allowing researchers to attribute differences to the environment.
(A) Both A and R are true and R is the correct explanation of A.
(B) Both A and R are true but R is not the correct explanation of A.
(C) A is true but R is false.
(D) A is false but R is true.

15. Which of the following is an INCORRECTLY matched pair?
(A) Fraternal Twins — Share 100% of the same genetic sequence.
(B) Monozygotic Twins — Developed from a single fertilized egg.
(C) Dizygotic Twins — Developed from two separate eggs fertilized by two different sperm.
(D) Siblings — Share approximately 50% of their genetic material on average.

16. Which of the following represents the most appropriate view of the "Modern Interactionist" perspective on development?
(A) Nature and Nurture operate as independent variables during maturation.

(D) 1, 2, and 3

50. In the study of heredity, what does the "Mendelian Principle of Segregation" refer to?
(A) The separation of alleles during gamete formation.
(B) The grouping of identical twins in research.
(C) The separation of children from parents in adoption studies.
(D) The division of the environment into prenatal and postnatal.

51. Which of the following is a fact about human genetics?
(A) Genes are located on the cell membrane.
(B) Environment only affects physical height.
(C) Humans have 23 pairs of chromosomes.
(D) All twins are identical.

52. Read the following statements and select the correct option:
Statement I: Fraternal twins are also known as dizygotic twins.
Statement II: They share approximately 50% of their genes, just like regular siblings.
(A) Statement I is correct, Statement II is incorrect.
(B) Statement II is correct, Statement I is incorrect.
(C) Both are correct.
(D) Both are incorrect.

53. Which of the following is an INCORRECT pair?
(A) Genotype — Genetic makeup
(B) Phenotype — Visible traits
(C) Dominant trait — Only expressed if homozygous
(D) Meiosis — Produces sperm and egg cells

54. If two parents are carriers of a recessive gene for a disorder but do not have the disorder themselves, what is the genotype of the parents?
(A) Homozygous dominant
(B) Heterozygous
(C) Homozygous recessive
(D) Hemizygous

55. Which environmental factor is most likely to affect the development of a fetus during the first trimester?
(A) Quality of the local high school
(B) The child's future socioeconomic status
(C) Peer pressure in the neighborhood
(D) Maternal exposure to radiation

56. All of the following are genetic factors EXCEPT:
(A) Native language spoken
(B) Eye color
(C) Blood type
(D) Genetic predisposition to diabetes

57. The "Interactionist View" implies that:
(A) Environment sets the range, while heredity determines the position.
(B) They never interact or influence each other during development.
(C) Heredity sets the range, environment determines position.
(D) One factor is always 100% and the other factor is exactly 0%.

58. Which study design compares relatives of different degrees of genetic relatedness?
(A) Family study
(B) Case study
(C) Experimental study
(D) Naturalistic observation

59. What is the most appropriate description of a "Gene"?
(A) A long strand of protein.
(B) A type of brain cell.
(C) A hormone released during growth.
(D) A specific sequence of nucleotides in DNA.

60. Which of the following is a correct statement?
(A) Adoption studies show that children only resemble their adoptive parents.
(B) Separated identical twins show similarities in personality and IQ.
(C) Heredity only affects physical traits and not behavioral characteristics.
(D) Environment has no functional role in the development of intelligence.

61. A counselor working with a family should understand that:
(A) All mental health issues result from poor parenting strategies.
(B) Genetics are completely irrelevant once a child has been born.
(C) Genetic and family factors both contribute

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(B) Both A and R are true but R is not the correct explanation of A.
(C) A is true but R is false.
(D) A is false but R is true.

24. If a psychologist is studying how different parenting styles in various cultures affect the personality traits of children, they are primarily focusing on:
(A) The influence of the cultural environment.
(B) The heritability coefficient of personality.
(C) Mendelian genetic transmission.
(D) Chromosomal abnormalities.

25. Which of the following is NOT a type of environment as categorized in developmental psychology?
(A) Prenatal environment
(B) Social environment
(C) Psychokinetic environment
(D) Cultural environment

26. Match List I with List II and select the correct answer using the codes given below:
List I: (Term)
P. Sensitive Period
Q. Family Studies
S. DNA
T. Gene-Environment Interaction
List II: (Key Association)
1. Double helix structure.
2. Shared genes among relatives.
3. Optimal time for certain capacities to emerge.
4. Different reactions of individuals to the same environment based on genetics.
(A) P-3, Q-2, S-1, T-4
(B) P-1, Q-4, S-2, T-3
(C) P-4, Q-1, S-3, T-2
(D) P-2, Q-3, S-4, T-1

27. Who is often referred to as the father of modern genetics for his work with pea plants?
(A) Charles Darwin
(B) Francis Galton
(C) Jean Piaget
(D) Gregor Mendel

28. Which of the following is an INCORRECTLY matched pair regarding developmental influences?
(A) School — Postnatal environment
(B) Nutrition — Hereditary factor
(C) DNA — Genetic blueprint
(D) Peer group — Social environment

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29. Consider the following statements about "Heritability":
1. It refers to the extent to which differences in a trait among a population are due to genetic differences.
2. It can vary from one population to another.
3. A heritability of 0.50 means that 50% of an individual's trait is caused by genes.
Which of the above statement(s) is/are correct?
(A) 1 and 2 only
(B) 2 and 3 only
(C) 1 and 3 only
(D) 1, 2, and 3

30. Which of the following represents the most accurate description regarding the genetic basis of mental disorders?
(A) Mental disorders are primarily caused by severe environmental stress.
(B) Only maternal biological lines can pass down genes for mental illness.
(C) Genetic factors play no functional role in schizophrenia or bipolarity.
(D) Disorders arise from genetic predispositions and environmental triggers.

31. What is the term for the biological mechanism where environmental factors cause genes to be "switched on or off" without changing the DNA sequence?
(A) Epigenetics
(B) Mutation
(C) Segregation
(D) Independent Assortment

32. Arrange the following stages of early development influenced by environment in chronological order:
1. Postnatal environment
2. Conception (Genetic blueprint set)
3. Prenatal environment
4. Adulthood (Socioeconomic environment)
(A) 2-3-1-4
(B) 1-2-3-4
(C) 3-2-1-4
(D) 2-1-3-4

97. The effect of a specific environment often depends on the individual's genes. This is called:
(A) Genetic determinism
(B) Gene-environment interaction
(C) Environmentalism
(D) Mutation

98. If a person has the gene for a specific disease but never develops it because of a healthy diet, this highlights:
(A) The role of the environment in gene expression.
(B) The failure of genetics.
(C) Mendelian laws are wrong.
(D) The person was never actually a carrier.

99. What is the "Genotype"?
(A) The physical appearance of an organism.
(B) The social status of an organism.
(C) The actual genetic makeup of an organism.
(D) The type of food an organism eats.

100. Which of the following is the most modern view on the Nature vs Nurture debate?
(A) Nature is 75% and Nurture is 25%.
(B) They are separate and never meet.
(C) Only Nurture matters in the 21st century.
(D) They are constantly interacting in a complex web.

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41. What is the fundamental unit of inheritance that occupies a specific location on a chromosome?
(A) Cell
(B) Protein
(C) Gene
(D) Ribosome

42. Which of the following is a correctly matched pair?
(A) DNA — Double Helix
(B) Phenotype — Internal genetic code
(C) Genotype — Observable traits
(D) Chromosome — Single protein molecule

43. Read the assertion and reason statements carefully and select the correct option.
Assertion (A): The heritability of intelligence tends to increase with age from childhood to adulthood.
Reason (R): As people grow older, they seek out environments that are compatible with their genetic predispositions.
(A) Both A and R are true and R is the correct explanation of A.
(B) Both A and R are true but R is not the correct explanation of A.
(C) A is true but R is false.
(D) A is false but R is true.

44. Which process describes the division of a single cell into two identical daughter cells, maintaining the same number of chromosomes?
(A) Meiosis
(B) Mitosis
(C) Fertilization
(D) Mutation

45. Which of the following is NOT an implication of heredity and environment for education?
(A) Recognizing specific individual differences in learning potential.
(B) Providing enriched environments to help students reach potential.
(C) Using genetic tests to determine which children attend school.
(D) Understanding that behavior results from biological and social factors.

46. Match List I with List II and select the correct answer using the codes given below:
List I: (Context)
P. Socioeconomic
Q. Cultural
R. Family
S. Peer
List II: (Specific Influence)
1. Norms, values, and traditions.
2. Resource access and nutrition.
3. Socialization and status among equals.
4. Primary attachment and early stimulation.
(A) P-1, Q-2, R-3, S-4
(B) P-4, Q-3, R-2, S-1
(C) P-3, Q-4, R-1, S-2
(D) P-2, Q-1, R-4, S-3

47. Which of the following represents the best summary of the role of "nurture" in personality development?
(A) Family and cultural experiences shape personality traits over time.
(B) Personality is fixed at birth by temperament and biological factors.
(C) Nurture only matters if the child has a high quality genetic makeup.
(D) Nurture is the only factor as children lack biological predispositions.

48. A researcher finds that the correlation of personality scores is higher between biological siblings raised together than between adopted siblings raised together. What does this suggest?
(A) Environment has no influence on personality.
(B) Genetic factors contribute to personality traits.
(C) Adoptive parents are better at raising children.
(D) Personality is entirely determined by the school environment.

49. Consider the following statements regarding "Eugenics":
1. It was a movement that advocated for selective breeding of humans.
2. It was based on the belief that human traits are almost entirely hereditary.
3. Modern psychology largely rejects it due to ethical and scientific flaws.
Which of the above statement(s) is/are correct?
(A) 1 and 2 only
(B) 2 and 3 only
(C) 1 and 3 only

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Statement I: Phenotype is the physical expression of a gene.
Statement II: Genotype is the underlying genetic code.
(A) I is correct, II is incorrect.
(B) II is correct, I is incorrect.
(C) Both are correct.
(D) Both are incorrect.

74. Which of the following is the most appropriate description of the role of the family in development?
(A) It is the primary socialization agent in the postnatal environment.
(B) It provides the fundamental genetic code for the child after birth.
(C) It is less important than peer groups in the stage of early childhood.
(D) It only influences physical growth rather than personality formation.

75. What is the definition of "Chromosomes"?
(A) Small packets of biological energy located in the cell.
(B) The specific liquid contained inside a cell nucleus.
(C) The protective outer layer of a gene's chemical sequence.
(D) Thread-like DNA structures that contain the genetic code.

76. Which of the following is an INCORRECT pair?
(A) Prenatal — Before birth
(B) Monozygotic — Two eggs
(C) Postnatal — After birth
(D) Dizygotic — Two eggs

77. Which of the following is NOT a Mendelian Principle?
(A) Law of Dominance
(B) Law of Segregation
(C) Law of Epigenetic Modification
(D) Law of Independent Assortment

78. How many chromosomes does a human sperm cell contain?
(A) 22
(B) 23
(C) 44
(D) 46

79. Read the following statements and select the correct option:
Statement I: Intelligence is 100% hereditary.
Statement II: Personality is 100% environmental.
(A) I is correct.
(B) II is correct.
(C) Both are correct.
(D) Both are incorrect.

80. A child who is genetically predisposed to be tall but experiences severe illness that stunts growth is demonstrating:
(A) A fundamental change in genotype.
(B) Impact of environment on phenotype.
(C) The law of Mendelian dominance.
(D) Occurrence of genetic mutation.

81. Which type of study is best for determining if a trait is influenced by the "shared environment" of a home?
(A) Studying the DNA of a single individual.
(B) Studying unrelated children adopted into the same home.
(C) Observing animals in the wild.
(D) Analyzing the fossil record.

82. Epigenetics shows that:
(A) Environments can influence gene expression.
(B) Genes are the sole destiny for humans.
(C) DNA cannot be passed between generations.
(D) All mutations are harmful to organisms.

83. What is "Heritability"?
(A) The legal ability of a child to inherit financial property.
(B) The biological process of somatic and gametic cell division.
(C) Statistical estimate of genetic contribution to trait differences.
(D) The anthropological study of ancient human skeletal fossils.

84. Identify the correct statement:
(A) Fraternal twins are exact biological clones of each other.
(B) Environment begins at the moment of birth for all infants.
(C) Deoxyribonucleic acid is found exclusively in brain cells.
(D) Genetic factors can influence responses to

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to child well-being.
(D) Environment is fixed and cannot be changed after early childhood.

62. What is the chromosomal composition of a biological male?
(A) XX
(B) YY
(C) XO
(D) XY

63. Read the following statements and select the correct option:
Statement I: Every human cell contains 46 genes.
Statement II: Every human cell contains 46 chromosomes.
(A) Statement I is correct, Statement II is incorrect.
(B) Statement II is correct, Statement I is incorrect.
(C) Both are correct.
(D) Both are incorrect.

64. Which of the following is an example of a "Recessive" trait in classic Mendelian genetics?
(A) Brown eyes which are typically dominant over blue eye alleles.
(B) Blue eyes expressed only in individuals lacking a dominant brown eye allele.
(C) Curly hair which is usually dominant over straight hair alleles.
(D) Dark skin which is generally dominant over light skin alleles.

65. Which of the following is NOT an environmental influence on intelligence?
(A) Early childhood stimulation
(B) Genetic mutations on the 21st chromosome
(C) Quality of nutrition
(D) Formal schooling

66. Which of the following is a correctly matched pair?
(A) DNA — Heredity carrier
(B) Epigenetics — Fixed genetic code
(C) Nature — Peer influence
(D) Nurture — DNA sequence

67. Which term describes the range of potential outcomes for a trait as determined by genetics?
(A) Canalization
(B) Speciation
(C) Reaction Range
(D) Mutation

68. The "Nature vs Nurture" debate is also known as:
(A) Biology vs Sociology
(B) Physical vs Mental
(C) Evolution vs Creation
(D) Heredity vs Environment

69. Which of the following best describes the "Postnatal Environment"?
(A) The uterine environment during pregnancy.
(B) Only the physical atmosphere like air and water.
(C) All influences encountered after birth.
(D) The process of meiosis in the parents.

70. Which of the following statements is INCORRECT?
(A) Genes are made of DNA.
(B) Personality has a significant genetic component.
(C) Culture has no influence on individual behavior.
(D) Prenatal care is vital for healthy development.

71. In terms of mental disorders, "Concordance Rate" refers to:
(A) The relative speed of recovery from a psychological state.
(B) The total financial cost of clinical genetic testing.
(C) The total number of biological siblings within a family.
(D) The percentage of twin pairs sharing the same disorder.

72. If a child is born with high musical "Nature" but lives in a "Nurture" environment with no musical instruments, the musical talent may:
(A) Remain latent or undeveloped.
(B) Automatically develop anyway.
(C) Change into a mathematical talent.
(D) Disappear from the DNA.

73. Read the following statements and select the correct option:

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(B) Heredity and environment are linked and influence each other constantly.
(C) Development is primarily the result of biological genetic maturation.
(D) Environmental factors can completely override any genetic predisposition.

17. Match List I with List II and select the correct answer using the codes given below:
List I: (Concept)
P. Heritability
Q. Eugenics
R. Epigenetics
S. Genotype
List II: (Definition)
1. The study of changes in organisms caused by modification of gene expression rather than alteration of the genetic code.
2. The genetic makeup of an individual.
3. The proportion of variation among individuals that we can attribute to genes.
4. The controversial practice of improving the human species by selective breeding.
(A) P-1, Q-2, R-3, S-4
(B) P-3, Q-4, R-1, S-2
(C) P-4, Q-3, R-2, S-1
(D) P-2, Q-1, R-4, S-3

18. A teacher notices that a student from a low socioeconomic background shows high artistic talent, which improves significantly with access to school art supplies. This is an example of:
(A) The realization of genetic potential through environmental enrichment.
(B) A purely genetic trait unaffected by external resources.
(C) The concept of "tabula rasa" where the environment creates the talent.
(D) Chromosomal mutation caused by educational exposure.

19. In human genetics, which pair of chromosomes determines the biological sex of an individual?
(A) The 1st pair
(B) The 13th pair
(C) The 21st pair
(D) The 23rd pair

20. Consider the following statements about Adoption Studies:
1. They help in determining the relative influence of genetics and environment.
2. If an adopted child's IQ is more similar to their biological parents than their adoptive parents, it suggests a genetic influence.
3. They are used to study the effects of the prenatal environment exclusively.
Which of the above statement(s) is/are correct?
(A) 1 and 2 only
(B) 2 and 3 only
(C) 1 and 3 only
(D) 1, 2, and 3

21. Read the following statements and select the correct option regarding "Critical Periods":
Statement I: A critical period is a specific time during development when an event has its greatest impact.
Statement II: If a necessary stimulus is missed during a critical period, the development may never occur properly.
(A) Statement I is correct, but Statement II is incorrect.
(B) Statement II is correct, but Statement I is incorrect.
(C) Both Statement I and Statement II are correct.
(D) Neither Statement I nor Statement II is correct.

22. Which of the following is a correct statement about the genetic basis of intelligence?
(A) Intelligence is determined by a single "IQ gene."
(B) Polygenic inheritance, involving many genes, likely influences cognitive abilities.
(C) Estimates of heritability suggest that genes account for approximately 0% of the variance in IQ.
(D) Genetic influence on intelligence decreases as an individual gets older.

23. Read the assertion and reason statements carefully and select the correct option.
Assertion (A): The prenatal environment can significantly influence a child's later development.
Reason (R): Exposure to teratogens like alcohol or drugs during pregnancy can lead to permanent structural or functional defects.
(A) Both A and R are true and R is the correct explanation of A.

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the environment.

85. Which of the following is a component of the "Socioeconomic Environment"?
(A) The number of mitochondria in a cell.
(B) The specific alleles on chromosome 21.
(C) Income level and parental education.
(D) The speed of neural transmission.

86. Read the following statements and select the correct option:
Statement I: Dominant genes always hide the effect of recessive genes in a heterozygous pair.
Statement II: Recessive traits only appear if the individual is homozygous for that trait.
(A) I is correct.
(B) II is correct.
(C) Both are correct.
(D) Both are incorrect.

87. Which of the following is a correct conceptual pair?
(A) Nature — Nurture
(B) Heredity — Environment
(C) Gene — DNA segment
(D) Phenotype — Observable characteristics

88. What is a "Zygote"?
(A) Cell formed by union of sperm and ovum.
(B) A specific type of regulatory hormone.
(C) A functional part of the human brain.
(D) A social group consisting of peer sets.

89. Why should educators understand the Nature-Nurture interaction?
(A) To ignore students with poor genes during the learning process.
(B) Because genes are the only factor that matters within schools.
(C) To provide support that maximizes each student's genetic potential.
(D) To ensure all students become identical in their skill levels.

90. Which of the following is known as the "blueprint of life"?
(A) DNA
(B) RNA
(C) ATP
(D) EEG

91. Which of the following is an INCORRECT statement about "Critical Periods"?
(A) They are windows of time for specific developmental milestones.
(B) They are most common in early embryonic development.
(C) They illustrate the importance of environmental timing.
(D) Missing a critical period has no lasting effect on development.

92. Which of the following is a correct statement?
(A) Culture has no impact on cognitive development.
(B) Adoption studies help separate the effects of nature and nurture.
(C) Personality is purely a result of the 23rd chromosome.
(D) Fraternal twins share 100% of their DNA.

93. Which of the following is NOT a major focus of twin studies?
(A) Heritability of intelligence.
(B) Concordance rates for schizophrenia.
(C) The chemical composition of the moon.
(D) Influence of peer groups on identical twins raised together.

94. "Polygenic inheritance" means:
(A) A trait is controlled by only one gene.
(B) A trait is not controlled by genes at all.
(C) A trait is only passed from the father.
(D) A trait is controlled by multiple genes.

95. Read the following statements and select the correct option:
Statement I: Prenatal environment refers to the environment before birth.
Statement II: Postnatal environment refers to the environment after birth.
(A) I is correct.
(B) II is correct.
(C) Both are correct.
(D) Both are incorrect.

96. Which of the following is a correctly matched pair?
(A) Fraternal Twins — Monozygotic
(B) Identical Twins — Monozygotic
(C) DNA — Protein cell
(D) Environment — Internal genetic code

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33. Which of the following is a correct statement regarding the role of socioeconomic status (SES) in development?
(A) Socioeconomic status is a trait determined by purely genetic factors.
(B) High SES provides resources that enhance genetic cognitive expression.
(C) Household status has no measurable impact on physical health outcomes.
(D) Low SES children are inherently inferior to high SES children in IQ.

34. Read the assertion and reason statements carefully and select the correct option.
Assertion (A): Francis Galton's work on eugenics is widely critiqued in modern psychology.
Reason (R): Eugenics ignores environmental influences and was historically used to justify social discrimination.
(A) Both A and R are true and R is the correct explanation of A.
(B) Both A and R are true but R is not the correct explanation of A.
(C) A is true but R is false.
(D) A is false but R is true.

35. Which study method is most effective for "separating" the effects of shared environment from genetic influence?
(A) Single-child case study
(B) Cross-sectional observation
(C) Studying identical twins raised apart
(D) Studying friends in the same school

36. Which of the following statements about "Genes" is INCORRECT?
(A) Genes are fundamental segments of the deoxyribonucleic acid molecule.
(B) Humans have a total of approximately 20,000–25,000 functional genes.
(C) Genes provide the necessary biological code for building proteins.
(D) Every gene expresses itself identically in every environment.

37. Match List I with List II and select the correct answer using the codes given below:
List I: (Concept)
P. Genetic basis of intelligence
Q. Environmental influence on personality
R. Prenatal impact
S. Sensitive periods
List II: (Focus Area)
1. Teratogens and maternal health.
2. Language acquisition and social bonding.
3. Heritability coefficients and twin IQ scores.
4. Parental warmth and peer interactions.
(A) P-1, Q-2, R-3, S-4
(B) P-4, Q-3, R-2, S-1
(C) P-3, Q-4, R-1, S-2
(D) P-2, Q-1, R-4, S-3

38. A child born with a genetic predisposition for anxiety only develops an anxiety disorder after experiencing a traumatic event at school. This is an example of:
(A) Pure heredity
(B) Gene-environment interaction
(C) Pure environment
(D) Mendelian dominance

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39. Read the following statements and select the correct option regarding "Sensitive Periods":
Statement I: Sensitive periods are less rigid than critical periods.
Statement II: During sensitive periods, an individual is particularly responsive to certain types of experiences.
(A) Statement I is correct, but Statement II is incorrect.
(B) Statement II is correct, but Statement I is incorrect.
(C) Both Statement I and Statement II are correct.
(D) Neither Statement I nor Statement II is correct.

40. Consider the following about "Identical vs Fraternal Twins":
1. Identical twins result from one zygote splitting into two.
2. Fraternal twins are genetically no more similar than regular siblings.
3. Differences between identical twins must be due to environmental factors.
Which of the above statement(s) is/are correct?
(A) 1 and 2 only
(B) 2 and 3 only
(C) 1 and 3 only
(D) 1, 2, and 3

ANSWERS

1. (B) Biological transmission of physical and mental traits from parents to offspring.
Heredity involves the biological process by which genetic information is passed from parents to their biological offspring through DNA. This transmission determines physical characteristics and predispositions for certain mental traits. It provides the foundational biological blueprint that dictates an individual's growth potential and inherent capabilities throughout their life, beginning at the very moment of conception.

2. (C) 46
Healthy human somatic cells typically contain forty-six chromosomes, which are organized into twenty-three pairs. One set of twenty-three chromosomes is inherited from the biological mother, while the other set of twenty-three comes from the biological father. These thread-like structures in the cell nucleus carry the essential genetic information for development, growth, and overall biological functioning.

3. (C) Both Statement I and Statement II are correct.
The nature versus nurture debate explores the relative contributions of genetic inheritance and environmental factors to human development. Nature represents the biological and genetic predispositions that individuals possess from birth. Nurture encompasses the vast array of external influences, including social interactions, cultural norms, family dynamics, and educational experiences that shape an individual's growth and personality traits.

4. (A) Both A and R are true and R is the correct explanation of A.
Genes represent the fundamental physical and functional units of heredity that carry biological instructions. Composed of deoxyribonucleic acid, genes provide the specific codes required for the synthesis of proteins. These proteins are vital for the structure and functioning of cells, effectively making genes the essential blueprints for building and operating living organisms through their chemical instructions.

5. (C) It refers only to the physical surroundings like climate and geography.
Environment encompasses a broad spectrum of influences beyond mere physical surroundings like climate or geography. It includes the prenatal conditions within the mother's womb and various postnatal factors. Social structures, economic conditions, cultural traditions, and family relationships are all critical components of the environment that influence an individual's developmental trajectory and how their genetic potential is expressed.

6. (B) Law of Dominance — One allele can mask the expression of another.
The principle of dominance explains how certain alleles can mask the expression of others in a heterozygous pair. In this biological interaction, the dominant trait is physically expressed, while the recessive trait remains hidden in the phenotype. This fundamental genetic concept helps predict how specific characteristics are observed across successive generations based on the presence of specific gene variants.

7. (D) P-3, Q-2, R-1, S-4
Research methods like twin and adoption studies are essential for isolating genetic and environmental influences. Twin studies compare identical and fraternal pairs to estimate heritability. Adoption studies contrast biological and adoptive parents to observe developmental impacts. Family studies track trait clustering within households, while longitudinal studies observe changes in the same individuals over a long period of time.

8. (A) The interaction between heredity and environment.
Development results from the dynamic interplay between genetic potential and environmental circumstances. While heredity may provide a blueprint for a trait like high stature, environmental factors like nutrition are necessary for that potential to be fully realized. Stunted growth due to malnutrition demonstrates how environmental deficits can limit biological

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due to environmental factors, which was not part of Mendel's original nineteenth-century framework of classical genetic laws regarding discrete units of biological inheritance.

78. (B) 23
Human gametes, which are sperm and egg cells, contain twenty-three individual chromosomes. This is exactly half the number found in regular somatic cells. When a sperm fertilizes an egg, the two sets of twenty-three combine to form a zygote with the full complement of forty-six chromosomes. This process ensures genetic variation and maintains the species' chromosome count across successive generations.

79. (D) Both are incorrect.
Modern psychology rejects the idea that complex traits like intelligence or personality are determined entirely by either nature or nurture. Instead, these characteristics result from a continuous and complex interaction between genetic predispositions and environmental experiences. Both statements are incorrect because they ignore the significant contribution of the opposing factor in human development, behavior, and the realization of individual potential.

80. (B) Impact of environment on phenotype.
While an individual's genotype may include a predisposition for tall stature, external environmental factors like severe illness can prevent that trait from being realized. This outcome is an example of how the environment influences the phenotype, which is the observable characteristic. The underlying genetic code remains the same, but the physical expression is limited by environmental stressors during the growth process.

81. (B) Studying unrelated children adopted into the same home.
Studying unrelated children who are raised together in the same household allows researchers to isolate the effects of the shared environment. Since these children share no genetic relationship, any similarities in their behavior or development can be attributed to the influences of the home they share. This method helps clarify how nurture shapes individuals independently of their nature and genetic inheritance.

82. (A) Environments can influence gene expression.
Epigenetics demonstrates that environmental factors such as diet, stress, and lifestyle can trigger chemical changes that turn genes on or off. This means that while our DNA sequence is fixed, the way our genes function is dynamic and responsive to our surroundings. These changes can have significant effects on health and development throughout a person's life and can be passed down.

83. (C) Statistical estimate of genetic contribution to trait differences.
Heritability is a statistical measure used to estimate the proportion of variation in a specific trait within a population that can be attributed to genetic differences among individuals. It does not indicate what percentage of an individual's trait is genetic. Instead, it provides insight into how much genetics matter for trait differences within a particular group under specific environmental conditions during study.

84. (D) Genetic factors can influence responses to the environment.
Genetic factors often determine how an individual reacts to their environment. For instance, two people might experience the same stressful event, but their biological predispositions could lead to very different psychological responses. This highlights the complex interaction between nature and nurture, where genes and environment do not act independently but rather influence each other's effects throughout the lifespan of the individual.

85. (C) Income level and parental education.
The socioeconomic environment consists of the social and economic factors that influence an individual's life. Key components include household income level, parental education, and occupation. These factors determine the quality of housing, nutrition, and educational opportunities available to a child. In contrast, biological elements like mitochondria or alleles are part of the internal hereditary makeup determined during the conception process.

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biological foundation for traits, while phenotype refers to the physical expression of those traits.

18. (A) The realization of genetic potential through environmental enrichment.
Human development often involves the activation of latent genetic predispositions through favorable environmental conditions. A student may possess an innate biological capacity for art, but this talent requires access to resources and training to become fully evident. This scenario exemplifies how an enriched environment facilitates the expression of an individual's heredity, allowing their natural potential to be fully realized.

19. (D) The 23rd pair
In humans, biological sex is determined by the twenty-third pair of chromosomes, known as the sex chromosomes. Typically, females possess two X chromosomes, while males possess one X and one Y chromosome. These chromosomes carry the specific genetic information necessary for the development of male or female primary sexual characteristics and influence various biological processes throughout the individual's entire lifespan.

20. (A) 1 and 2 only
Adoption studies are powerful tools for evaluating the relative impact of genetics and environment. When adopted children resemble their biological parents more than their adoptive parents in a trait like intelligence, it suggests a strong genetic influence. These studies primarily focus on postnatal and hereditary factors rather than examining the effects of the prenatal environment in an exclusive manner.

21. (C) Both Statement I and Statement II are correct.
Critical periods represent specific timeframes during development when an individual is highly sensitive to certain environmental stimuli. During these windows, the presence or absence of specific experiences can have a permanent impact on biological and psychological growth. Failure to receive necessary stimulation during these periods may result in irreversible developmental deficits, emphasizing the importance of timing in environmental influences.

22. (B) Polygenic inheritance, involving many genes, likely influences cognitive abilities.
Intelligence is a complex trait that does not depend on a single gene but rather on the collective influence of many different genes. This phenomenon, known as polygenic inheritance, suggests that various genetic markers contribute small amounts to overall cognitive ability. Environmental factors also play a significant role in determining how this genetic potential is realized during an individual's life.

23. (A) Both A and R are true and R is the correct explanation of A.
The prenatal environment provides the initial context for human development before birth. Exposure to harmful external substances, known as teratogens, can interfere with normal biological processes during pregnancy. Substances like alcohol, drugs, or environmental toxins can lead to permanent structural abnormalities or functional impairments, highlighting the vital importance of maternal health for the future development of the child.

24. (A) The influence of the cultural environment.
Cultural environment includes the shared values, traditions, and social norms that influence how children are raised. When psychologists study how different parenting techniques across various societies affect personality, they are examining environmental influences. These external factors shape behavioral patterns and social expectations, contributing significantly to an individual's unique development and socialization process within their specific community or group.

25. (C) Psychokinetic environment
Developmental psychology identifies several environmental categories, including the prenatal environment within the womb and social environments like family and peers. Cultural environments also play a major role in shaping values and behaviors throughout life. However, the term psychokinetic environment is not a standard classification used to describe environmental influences on human growth, personality formation, or cognitive development in scientific literature.

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26. (A) P-3, Q-2, S-1, T-4
Sensitive periods represent optimal times for certain capacities, like language, to emerge. Family studies examine shared genes among relatives to understand trait transmission. DNA is characterized by its unique double helix structure. Gene-environment interaction explains how individuals with different genetic backgrounds react uniquely to the same external environmental conditions, illustrating the complex relationship between nature and nurture in development.

27. (D) Gregor Mendel
Gregor Mendel is widely recognized as the father of modern genetics due to his pioneering experiments with pea plants in the nineteenth century. He established the fundamental laws of inheritance, including the principles of segregation and independent assortment. His work laid the groundwork for our scientific understanding of how traits are passed between generations through the transmission of distinct biological units.

28. (B) Nutrition — Hereditary factor
Nutrition is an environmental factor, not a hereditary one, as it involves the external intake of food and nutrients after conception. Schools and peer groups are correctly classified as parts of the postnatal and social environments, respectively. DNA serves as the genetic blueprint, providing the internal biological instructions for development and growth that are inherited directly from an individual's biological parents.

29. (A) 1 and 2 only
Heritability is a statistical measure reflecting the proportion of observed variation in a trait within a population that is due to genetic differences. It is important to note that heritability estimates apply to groups, not individuals, and can change depending on the population or environment studied. It does not measure the exact percentage of an individual's specific trait caused by genes.

30. (D) Disorders arise from genetic predispositions and environmental triggers.
Most mental disorders result from a complex combination of genetic vulnerabilities and environmental triggers. An individual may inherit a biological predisposition for a condition like schizophrenia, but the actual onset of the disorder often depends on external stressors. This diathesis-stress model emphasizes the interaction between nature and nurture in mental health rather than attributing outcomes to a single factor.

31. (A) Epigenetics
Epigenetics refers to the study of biological mechanisms that modify gene expression without changing the underlying DNA sequence. Environmental factors like stress, diet, and toxins can cause chemical markers to be added to DNA, effectively switching genes on or off. These changes can influence health and behavior throughout an individual's life and can sometimes be passed down to future offspring.

32. (A) 2-3-1-4
Human development follows a specific chronological sequence beginning at the moment of conception, where the genetic blueprint is established. This is followed by the prenatal environment during pregnancy. After birth, the individual enters the postnatal environment, which includes family and early social influences. Finally, adulthood involves complex socioeconomic and cultural environments that continue to influence various developmental outcomes and life stages.

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33. (B) High SES provides resources that enhance genetic cognitive expression.
Socioeconomic status significantly impacts development by determining the quality of resources available to a child. High SES often provides better nutrition, healthcare, and educational opportunities, which can enhance the expression of genetic potential. Conversely, low SES may present barriers that limit cognitive and physical growth, demonstrating how environmental conditions can affect the realization of an individual's underlying hereditary characteristics.

34. (A) Both A and R are true and R is the correct explanation of A.
Francis Galton's eugenics movement is heavily critiqued today because it promoted selective breeding based on flawed scientific assumptions. By ignoring the profound impact of environmental factors on human traits, eugenics was historically

used to justify social discrimination and inequality. Modern psychology emphasizes the ethical necessity of recognizing both genetic and environmental influences as essential components of human growth and development.

35. (C) Studying identical twins raised apart
Studying identical twins who were separated at birth and raised in different households is a powerful research design. Because these twins share one hundred percent of their DNA but different environments, similarities can be attributed to genetics, while differences highlight environmental influence. This method effectively separates nature from nurture in human development, providing clear evidence for the role of hereditary factors.

36. (D) Every gene expresses itself identically in every environment.
Genes are segments of DNA that provide instructions for protein synthesis, and humans possess approximately twenty thousand to twenty-five thousand functional genes. However, gene expression is not identical in every environment. External factors can significantly alter how a gene is expressed, leading to different phenotypic outcomes even for individuals with the same genotype, which demonstrates the plasticity of genetic instructions.

37. (C) P-3, Q-4, R-1, S-2
The genetic basis of intelligence is often studied using heritability coefficients and twin IQ scores. Personality development focuses on environmental factors like parental warmth and peer interactions. Prenatal impact research examines maternal health and teratogens. Sensitive periods are associated with critical developmental milestones such as language acquisition and early social bonding, highlighting the importance of timing in various developmental processes.

38. (B) Gene-environment interaction
Gene-environment interaction occurs when an individual's genetic sensitivity to an event depends on their environmental experiences. In this scenario, a biological predisposition for anxiety remains dormant until triggered by a specific traumatic event at school. This illustrates how nature and nurture work together to produce specific psychological outcomes rather than operating in isolation or being determined by a single factor.

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39. (C) Both Statement I and Statement II are correct.
Sensitive periods are specific developmental windows during which an individual is particularly responsive to certain types of environmental experiences. Unlike critical periods, which are very rigid and time-limited, sensitive periods are more flexible, meaning development can still occur later, though with more difficulty. They emphasize the importance of timing and environmental responsiveness in the learning and maturation process throughout childhood.

40. (D) 1, 2, and 3
Identical twins develop from a single fertilized egg that splits, resulting in shared genetic material. Fraternal twins come from two separate eggs and are genetically like regular siblings. Because identical twins are genetic clones, any differences between them must arise from unique environmental factors, providing a natural experiment for researchers to study the relative impact of nature and nurture on development.

41. (C) Gene
A gene is the fundamental unit of inheritance that carries biological information from one generation to the next. Located at specific positions on chromosomes, genes consist of DNA sequences that code for proteins. They determine individual traits and predispositions, serving as the primary mechanism through which hereditary characteristics are transmitted and expressed in every living organism from the point of conception.

42. (A) DNA — Double Helix
Deoxyribonucleic acid is characterized by its unique double helix structure, resembling a twisted ladder. In contrast, the phenotype refers to observable traits, while the genotype represents the internal genetic code. Chromosomes are large structures made of DNA and proteins, rather than being single protein molecules. These terms are fundamental to understanding how genetic science explains the inheritance and expression of traits.

outcomes, illustrating the complex relationship between nature and nurture.

9. (C) Maternal nutrition during gestation
Postnatal environment refers to the collective external influences that an individual encounters after birth. Factors like peer interactions, schooling quality, and family socioeconomic status fall into this category. In contrast, maternal nutrition during gestation occurs before birth and is classified as part of the prenatal environment, affecting fetal development rather than the postnatal experiences of the child.

10. (D) 1, 2, and 3
Deoxyribonucleic acid serves as the primary carrier of genetic instructions for all living organisms. This complex molecule is organized into structures called chromosomes located within the cell nucleus. It provides the essential information required for growth, survival, and reproduction, making it the foundational blueprint for biological functioning and development. All identified statements regarding its structure and function are correct.

11. (D) Recessive traits are expressed only in a homozygous genetic state.
Traits are determined by alleles, which can be dominant or recessive. A recessive trait is only visible in the phenotype if an individual possesses two identical copies of that specific allele. If a dominant allele is present, it will typically override the expression of the recessive one, hiding its presence. This homozygous state is necessary for recessive characteristics to appear.

12. (A) DNA → Gene → Chromosome → Nucleus
Biological organization follows a specific hierarchy of complexity. Deoxyribonucleic acid molecules form the basic building blocks that make up genes. Genes are specific segments of this DNA that reside on larger structures called chromosomes. These chromosomes are housed within the cell nucleus, which acts as the control center for genetic information and cellular processes within the organism's body.

13. (C) Phenotype
The term phenotype describes the total observable characteristics or traits of an individual, including physical appearance and behavior. This expression is the result of the complex interaction between an organism's underlying genetic makeup and its external environment. Traits like eye color, height, and blood type are examples of phenotypic expression, reflecting how nature and nurture combine in physical form.

14. (A) Both A and R are true and R is the correct explanation of A.
Monozygotic twins are valuable in psychological research because they share nearly one hundred percent of their genetic material. Because their DNA is identical, any observed differences in their behavior or personality can be more confidently attributed to unique environmental influences. This allows researchers to isolate the specific impact of nurture while holding the genetic variable constant across individuals.

15. (A) Fraternal Twins — Share 100% of the same genetic sequence.
Fraternal twins, or dizygotic twins, develop from two separate eggs fertilized by two distinct sperm cells. Consequently, they are genetically similar to regular siblings, sharing approximately fifty percent of their DNA on average. They do not share one hundred percent of their genetic material, which is a characteristic exclusive to identical twins who develop from a single fertilized egg.

16. (B) Heredity and environment are linked and influence each other constantly.
The modern interactionist perspective posits that development is not the result of either nature or nurture alone. Instead, heredity and environment are inextricably linked, constantly influencing and shaping each other. This view suggests that biological predispositions and external experiences work together in a complex, bidirectional manner throughout a person's life to produce unique outcomes for every individual.

17. (B) P-3, Q-4, R-1, S-2
Heritability measures the proportion of trait variation in a population attributable to genetics. Eugenics is the controversial advocacy for selective breeding. Epigenetics examines changes in gene expression without altering the DNA code itself. Finally, genotype refers to the specific genetic makeup of an individual, providing the

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identical twins share the same DNA, fraternal twins do not. Furthermore, the environment affects many developmental aspects beyond just physical height, including behavior, personality traits, and various cognitive abilities throughout life.

52. (C) Both are correct.
Fraternal twins, also known as dizygotic twins, result from the simultaneous fertilization of two separate eggs by two different sperm cells. Consequently, they share approximately fifty percent of their genetic material, making them no more similar than regular siblings born at different times. They provide an important comparison group for researchers studying the relative impact of nature and nurture on development.

53. (C) Dominant trait — Only expressed if homozygous
A dominant trait is expressed in the phenotype even if only one copy of the allele is present in a heterozygous pair. In contrast, recessive traits require a homozygous state, meaning two identical alleles, to be physically observed. Genotype refers to genetic makeup, while phenotype refers to visible traits, and meiosis is the specialized process that produces reproductive sperm and egg cells.

54. (B) Heterozygous
Parents who carry a recessive gene for a disorder without expressing the condition themselves are described as heterozygous. This means they possess one dominant allele and one recessive allele for that specific trait. The dominant allele masks the effect of the recessive one, but the parents can still pass the recessive gene to their offspring, who may express the trait if homozygous.

55. (D) Maternal exposure to radiation
During the first trimester, the fetus is highly vulnerable to environmental factors as major organs and structures are forming. Maternal exposure to radiation is a significant risk factor that can lead to developmental abnormalities or health issues. Postnatal factors like schooling, peer pressure, or future socioeconomic status are not relevant during this early stage of prenatal development within the mother's womb.

56. (A) Native language spoken
Native language is an acquired environmental trait learned through social interaction and exposure after birth. It is not determined by biological inheritance or DNA. In contrast, characteristics such as eye color, blood type, and genetic predispositions for medical conditions like diabetes are directly influenced by the genetic material passed down from biological parents at the moment of an individual's conception.

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57. (C) Heredity sets the range, environment determines position.
The interactionist view suggests that heredity establishes a range of potential developmental outcomes, while the environment determines where an individual falls within that range. For example, genetics may set a potential range for intelligence, but environmental factors like education and nutrition decide the actual cognitive level achieved. Both factors are essential and interdependent throughout the entire process of human growth.

58. (A) Family study
Family studies are used to observe how traits cluster among relatives with varying degrees of genetic similarity, such as parents, siblings, and cousins. By comparing the prevalence of a trait across these different groups, researchers can estimate the relative influence of shared genes. These studies help identify hereditary patterns in physical and psychological characteristics by looking at shared biological inheritance.

59. (D) A specific sequence of nucleotides in DNA.
A gene is a specific sequence of nucleotides within a DNA molecule that serves as the basic unit of heredity. It contains the instructions necessary for the synthesis of proteins, which perform essential functions in the body. Genes are located on chromosomes and are responsible for the transmission of biological traits and predispositions from parents to offspring during the reproductive process.

60. (B) Separated identical twins show similarities in personality and IQ.
Research on monozygotic twins who were raised apart has consistently shown significant similarities in personality, interests, and cognitive abilities. These findings emphasize

the strong influence of genetic factors on human development. While environment is undoubtedly important, the striking resemblance between separated identical twins highlights the foundational role of the biological blueprint in shaping individuals regardless of their unique upbringing or surroundings.

61. (C) Genetic and family factors both contribute to child well-being.
Professional counselors must recognize that child well-being is influenced by a combination of biological predispositions and environmental circumstances. While family dynamics and parenting play a major role in development, genetic factors also contribute to a child's temperament and mental health. A holistic approach considers the ongoing interaction between these two powerful developmental forces from childhood through adulthood to ensure success.

62. (D) XY
The chromosomal composition of a biological male typically includes one X chromosome and one Y chromosome as the twenty-third pair. The presence of the Y chromosome triggers the development of male physical characteristics. In contrast, biological females typically possess two X chromosomes. These sex chromosomes are responsible for the primary biological differences between the sexes and are determined at conception.

63. (B) Statement II is correct, Statement I is incorrect.
Every typical human somatic cell contains forty-six chromosomes, organized into twenty-three pairs. However, these cells contain thousands of functional genes, not just forty-six. Genes are the smaller functional units located on the much larger chromosome structures. Therefore, while the chromosome count is forty-six, the gene count is significantly higher across the entire human genome, providing complex instructions for development.

64. (B) Blue eyes expressed only in individuals lacking a dominant brown eye allele.
In classic Mendelian genetics, a recessive trait like blue eyes is only expressed when an individual lacks a dominant allele, such as the one for brown eyes. This means the person must be homozygous for the recessive allele to display the trait. Dominant traits, like dark skin or curly hair, can mask recessive ones in individuals with a heterozygous genetic makeup.

65. (B) Genetic mutations on the 21st chromosome
Genetic mutations, such as those occurring on the twenty-first chromosome associated with Down syndrome, are biological factors present from conception. They are not environmental influences. Factors like early childhood stimulation, the quality of nutrition, and formal schooling are all external environmental components that can significantly impact the development and expression of cognitive abilities throughout an individual's life and education.

66. (A) DNA — Heredity carrier
Deoxyribonucleic acid is the primary molecule responsible for carrying genetic information between generations. Epigenetics involves changes in expression, not a fixed code. Nature refers to biological factors rather than peer influence, and nurture refers to environmental experiences rather than the DNA sequence itself. DNA serves as the foundational chemical basis for heredity, providing the blueprint for all biological growth and development.

67. (C) Reaction Range
The concept of reaction range describes the variety of possible phenotypic expressions for a single genotype depending on different environmental conditions. It suggests that while genes set the upper and lower limits for a trait, the environment determines the actual level achieved within those boundaries. This highlights the collaborative relationship between nature and nurture in development and explains individual differences in outcomes.

68. (D) Heredity vs Environment
The nature versus nurture debate is frequently referred to as heredity versus environment. This terminology reflects the discussion regarding the relative importance of biological inheritance and external life experiences. Both terms are used interchangeably in psychology to explore how innate factors and environmental influences work together to shape human behavior, personality,

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and developmental trajectories from birth until late adulthood.

69. (C) All influences encountered after birth.
The postnatal environment encompasses the entire range of external influences that an individual experiences from the moment of birth throughout their life. This includes social interactions, cultural exposure, education, nutrition, and physical surroundings. It is distinct from the prenatal environment, which refers specifically to the conditions within the womb during pregnancy before the child is introduced to the outside world.

70. (C) Culture has no influence on individual behavior.
Culture significantly influences individual behavior by providing the social norms, values, and traditions that guide how people interact and think. Genes are indeed made of DNA, and personality traits have measurable genetic components. Additionally, prenatal care is essential for healthy development. The claim that culture has no influence is factually incorrect in developmental psychology, as nurture plays a vital role.

71. (D) The percentage of twin pairs sharing the same disorder.
Concordance rate is a statistical term used in twin studies to describe the probability that two individuals will share the same trait or disorder. For example, if one twin has a condition, the concordance rate indicates how often the other twin also has it. High concordance among identical twins compared to fraternal twins suggests a strong genetic component to the trait.

72. (A) Remain latent or undeveloped.
Genetic potential for a skill, such as musical talent, requires an appropriate environmental context to be fully expressed. If a child with a high biological predisposition lacks access to instruments or instruction, the talent may remain dormant. This demonstrates that heredity provides the possibility for development, but the environment is necessary to turn that potential into observable reality through practice.

73. (C) Both are correct.
The genotype refers to the specific underlying genetic code or makeup that an individual inherits from their parents. The phenotype is the physical or observable expression of those genes, which is influenced by both the genotype and the environment. Together, these terms explain the difference between what is hidden in the DNA and what is visible in the physical individual.

74. (A) It is the primary socialization agent in the postnatal environment.
The family serves as the first and most influential socialization agent in the postnatal environment. It provides the initial social interactions, emotional bonds, and values that shape a child's early development. While peer groups become more important later, the family remains the fundamental unit for emotional security and the acquisition of basic social behaviors during the critical early years of childhood.

75. (D) Thread-like DNA structures that contain the genetic code.
Chromosomes are thread-like structures located within the cell nucleus that consist of DNA molecules tightly coiled around proteins. They carry the genetic information in the form of genes, which act as the blueprints for building and operating the body. Humans typically have forty-six chromosomes, which are inherited from their biological parents at the moment of conception and determine various traits.

76. (B) Monozygotic — Two eggs
Monozygotic twins, also known as identical twins, develop from a single fertilized egg that splits into two separate embryos. They share one hundred percent of their genetic material. In contrast, dizygotic or fraternal twins develop from two different eggs fertilized by two different sperm cells, sharing only about fifty percent of their DNA on average, similar to regular biological siblings.

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77. (C) Law of Epigenetic Modification
Gregor Mendel established three main laws: dominance, segregation, and independent assortment. These principles describe the basic patterns of genetic inheritance for simple traits. Epigenetic modification is a modern biological concept that explores changes in gene expression

43. (A) Both A and R are true and R is the correct explanation of A.
Research indicates that the heritability of intelligence increases as individuals age. This phenomenon occurs because adults have more freedom to select and create environments that align with their innate genetic tendencies. As they gravitate toward activities and settings that suit their biological predispositions, the relative influence of genes on their cognitive performance and overall behavior becomes more pronounced over time.

44. (B) Mitosis
Mitosis is the biological process of cell division where a single somatic cell divides to produce two genetically identical daughter cells. This process ensures that each new cell maintains the same number of chromosomes as the parent cell. It is essential for growth, tissue repair, and general maintenance of the body's biological systems, occurring throughout the lifespan of the organism.

45. (C) Using genetic tests to determine which children attend school.
Understanding heredity and environment helps educators recognize individual differences and provide enriched learning environments to maximize student potential. However, using genetic tests to exclude children from school is ethically unacceptable and scientifically unsound. Education should focus on supporting the development of all students by addressing both their biological needs and the diverse environmental contexts they encounter in their lives.

46. (D) P-2, Q-1, R-4, S-3
Socioeconomic factors influence development through access to resources and nutrition. Cultural factors involve shared norms, values, and traditions within a society. The family environment is critical for primary attachment and early developmental stimulation. Peer groups provide opportunities for socialization and the establishment of social status among individuals of similar age and standing, contributing to the overall postnatal environmental influence.

47. (A) Family and cultural experiences shape personality traits over time.
Nurture refers to the cumulative environmental influences that shape an individual's personality over time. Experiences within the family, social interactions, and cultural traditions contribute significantly to the development of specific traits and behaviors. While biology provides a foundation, the environment plays a vital role in molding how those innate predispositions are expressed, refined, and maintained throughout an individual's life stages.

48. (B) Genetic factors contribute to personality traits.
Higher personality correlations between biological siblings compared to adopted siblings suggest that shared genes contribute to these traits. Since biological siblings share more DNA, their greater similarity points to a hereditary influence. This does not mean environment is irrelevant, but it highlights the significant role that nature plays in determining individual personality characteristics and behavioral patterns across different family contexts.

49. (D) 1, 2, and 3
Eugenics promoted selective human breeding to improve traits, assuming heredity determined most characteristics. This ignored environmental factors and oversimplified genetics. Due to its flawed science and serious ethical violations, including discrimination and forced sterilization, modern psychology rejects it.

50. (A) The separation of alleles during gamete formation.
The Law of Segregation is a fundamental Mendelian principle stating that the two alleles for a trait separate during the formation of gamete cells. As a result, each sperm or egg cell carries only one allele for each inherited characteristic. This process ensures that offspring receive one genetic contribution from each biological parent, maintaining genetic diversity and consistency in inheritance patterns.

51. (C) Humans have 23 pairs of chromosomes.
A standard fact of human biology is that somatic cells contain twenty-three pairs of chromosomes, totaling forty-six. These structures are located within the cell nucleus, not the membrane. While

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86. (C) Both are correct.
In genetics, a dominant gene will always mask the phenotypic expression of a recessive gene in a heterozygous pairing. A recessive trait only becomes visible when an individual is homozygous for that trait, meaning they have inherited two copies of the recessive allele. These fundamental principles of inheritance help explain how traits are passed through generations and expressed in physical form.

87. (D) Phenotype — Observable characteristics
The phenotype refers to the observable physical and behavioral characteristics of an individual, such as height or eye color. While nature and nurture are related concepts, they are opposites, as are heredity and environment. A gene is a segment of DNA, but phenotype specifically describes the outward expression of the interaction between genetics and the external environment as seen in the individual.

88. (A) Cell formed by union of sperm and ovum.
A zygote is the single cell that results from the successful union of a sperm cell and an ovum during fertilization. It contains a complete set of forty-six chromosomes, half from each biological parent. This cell represents the very beginning of a new organism's development and contains the entire genetic blueprint for its future growth, development, and eventual physical appearance.

89. (C) To provide support that maximizes each student's genetic potential.
Educators must understand the interaction between nature and nurture to create learning environments that help each student reach their full genetic potential. By recognizing that biological predispositions are shaped by external experiences, teachers can provide targeted support and enrichment. This approach ensures that students' innate abilities are nurtured through appropriate educational strategies and resources tailored to their individual developmental needs.

90. (A) DNA
Deoxyribonucleic acid is commonly referred to as the blueprint of life because it contains the fundamental genetic instructions for the development, functioning, and reproduction of all living organisms. This molecule stores the complex codes required to build proteins and organize biological structures, making it the essential chemical foundation for every inherited characteristic in a person from their moment of conception.

91. (D) Missing a critical period has no lasting effect on development.
Critical periods are vital windows of time when specific developmental milestones must occur. If a necessary environmental stimulus is missed during this timeframe, it can result in permanent and irreversible developmental deficits. The claim that missing such a period has no lasting effect is incorrect, as these stages are essential for normal biological and psychological growth and function in human beings.

92. (B) Adoption studies help separate the effects of nature and nurture.
Adoption studies are a fundamental research tool in developmental psychology because they allow scientists to compare the influences of nature and nurture. By observing how adopted children resemble both their biological and adoptive parents, researchers can better understand the relative contributions of genetic inheritance and home environment to traits like intelligence, personality, and physical health throughout the lifespan of children.

93. (C) The chemical composition of the moon.
Twin studies are focused on understanding human development by examining heritability, concordance rates for mental disorders, and the influence of shared versus non-shared environments. These studies use the genetic similarity of twins to isolate biological and environmental effects. The chemical composition of the moon is a topic for lunar geology and is unrelated to psychological research or developmental science studies.

94. (D) A trait is controlled by multiple genes.
Polygenic inheritance occurs when a single physical or behavioral trait is influenced by the collective action of multiple genes rather than just one. Many complex human characteristics, such as height, skin color, and intelligence, are polygenic. This means that various genetic markers each contribute a small amount to the final expression of the trait in the individual throughout their growth.

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95. (C) Both are correct.
The prenatal environment encompasses all conditions and influences affecting the developing organism before birth, primarily within the mother's womb. The postnatal environment includes all external factors encountered from the moment of birth onwards. Both stages are critical in shaping developmental outcomes, as they represent the different environmental contexts an individual experiences throughout their entire life from conception through late adulthood.

96. (B) Identical Twins — Monozygotic
Identical twins are correctly classified as monozygotic because they develop from a single fertilized egg that splits. Fraternal twins are dizygotic, coming from two separate eggs. DNA is a molecule that carries genetic information rather than being a single protein cell. Environment refers to external surroundings and experiences rather than an internal genetic code, making the twin pair the only correct match.

97. (B) Gene-environment interaction
Gene-environment interaction refers to the phenomenon where the impact of an environmental factor depends on an individual's specific genetic makeup. For example, a stressful environment might lead to depression in one person but not another, based on their biological vulnerabilities. This concept highlights why different people respond uniquely to the same external circumstances based on their heredity and innate developmental factors.

98. (A) The role of the environment in gene expression.
This scenario demonstrates how environmental factors like a healthy diet can prevent the expression of a genetic predisposition for a disease. It highlights that genes do not always determine destiny; instead, the environment plays a crucial role in deciding whether certain genetic instructions are carried out. This interaction is central to our understanding of health and development in human science.

99. (C) The actual genetic makeup of an organism.
The genotype refers to the specific set of genes that an individual inherits from their parents. It represents the underlying biological code that serves as the foundation for all physical and behavioral traits. While the phenotype is the observable expression of these genes, the genotype is the hidden genetic information contained within the individual's DNA sequences throughout their entire developmental process.

100. (D) They are constantly interacting in a complex web.
The most current scientific perspective on the nature versus nurture debate is that the two factors are inextricably linked and constantly interacting. Development is not a simple addition of genes and environment but a complex process where they influence each other in a bidirectional manner. This modern view recognizes that both biological and environmental forces are equally essential for growth.

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CHAPTER 16

Human Development Index and Healthcare Goods

1. Who among the following economists is primarily associated with the conceptualization of the Human Development Index?
(A) Amartya Sen
(B) Mahbub ul Haq
(C) Jagdish Bhagwati
(D) Arvind Panagariya

2. In which year was the first Human Development Report published by the United Nations Development Programme?
(A) 1985
(B) 1990
(C) 1995
(D) 2000

3. Which international organization is responsible for the annual publication of the Human Development Report?
(A) The World Bank Group institutions
(B) International Monetary Fund bodies
(C) United Nations Development Programme
(D) World Health Organization divisions

4. The Human Development Index (HDI) is a composite index that measures average achievement in how many basic dimensions of human development?
(A) Two
(B) Three
(C) Four
(D) Five

5. Consider the following statements regarding the components of the Human Development Index:
1. It includes Life Expectancy at birth to represent the health dimension.
2. It uses Gross Domestic Product (GDP) per capita to represent the standard of living.
3. It includes Mean Years of Schooling and Expected Years of Schooling for education.

Which of the statements given above are correct?
(A) 1 and 2 only
(B) 2 and 3 only
(C) 1 and 3 only
(D) 1, 2, and 3

6. Which specific indicator is used by the UNDP to measure the health dimension of the Human Development Index?
(A) Infant Mortality Rate
(B) Life Expectancy at Birth
(C) Maternal Mortality Ratio
(D) Crude Death Rate

7. Mean Years of Schooling, a component of the education dimension in HDI, is calculated for adults of which age group?
(A) 15 years and older
(B) 18 years and older
(C) 21 years and older
(D) 25 years and older

8. What does "Expected Years of Schooling" signify in the context of the Human Development Index?
(A) Total years of schooling a child at entrance age is likely to attain
(B) Mean duration of time an individual has dedicated to formal learning
(C) Aggregate literacy rate observed across the entire adult population
(D) Proportion of students successfully finishing a tertiary education track

9. Match the items in List I with the items in List II and select the correct answer using the codes given below:
List I: (Dimension)
P. Long and healthy life
Q. Knowledge
R. A decent standard of living

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27. Why are private healthcare goods described as "excludable"?
(A) They are provided to the general public for no financial cost
(B) They are regulated and distributed solely by state agencies
(C) They possess no measurable utility or standard market value
(D) Access is restricted to those who pay the required price point

28. Which term refers to a good that is rival and excludable, such as a specific dose of a medicine?
(A) Public Good
(B) Private Good
(C) Merit Good
(D) Club Good

29. Healthcare is often classified as a "Merit Good" because:
(A) It is exclusively utilized by the most affluent socioeconomic groups
(B) It is distributed and managed primarily through international aid
(C) It provides social value and warrants use regardless of income
(D) It is a commodity that generates no significant external impacts

30. Given below are two statements: one is labelled as Assertion (A) and the other is labelled as Reason (R).
Assertion (A): The government intervention is necessary in the provision of merit goods like healthcare.
Reason (R): In a free market, individuals may under-consume merit goods because they fail to realize the full long-term benefits.
(A) Both A and R are true and R is the correct explanation of A.
(B) Both A and R are true but R is not the correct explanation of A.
(C) A is true but R is false.
(D) A is false but R is true.

31. Which of the following healthcare services is best described as a "Toll Good" or "Club Good"?
(A) Medical facility access restricted to paying members
(B) Public recreational spaces maintained by the state
(C) Nationwide immunization efforts for pediatric health
(D) Regulatory measures to ensure atmospheric air purity

32. Which of the following pairs is INCORRECTLY matched?
(A) Public Good — Non-excludable
(B) Toll Good — Non-excludable
(C) Private Good — Rival
(D) Merit Good — Under-consumed in free market

33. What is "Information Asymmetry" in the healthcare market?
(A) Scenarios where clinicians and patients share identical knowledge bases
(B) Imbalance where providers have more expertise than their patients
(C) Instances of the state withholding critical epidemiological data sets
(D) Schemes where insurers offer comprehensive data to all participants

34. Which phenomenon occurs when an insured individual takes more risks or consumes more healthcare services because they do not bear the full cost?
(A) Increased risk-taking after obtaining insurance
(B) Tendency of high-risk people to seek coverage
(C) Unintended spillover effects on the environment
(D) Balance between market supply and buyer demand

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35. Match the items in List I with the items in List II and select the correct answer using the codes given below:
List I: (Market Failure Term)
P. Externalities
Q. Moral Hazard
R. Adverse Selection
S. Information Asymmetry
List II: (Definition)
1. Imbalance of knowledge between parties
2. Behavior change after getting insurance
3. Impact of a transaction on a third party
4. High-risk individuals being more likely to buy insurance

17. Which index was introduced to adjust the HDI for disparities in achievements between women and men?
(A) Gender Parity Index
(B) Gender Development Index
(C) Gender Empowerment Measure
(D) Female Achievement Index

18. The Gender Inequality Index (GII) measures loss in human development due to inequality between female and male achievements in which three dimensions?
(A) Reproductive health, empowerment, and labor market participation
(B) Educational attainment, income levels, and overall health status
(C) Political involvement, literacy rates, and projected life span
(D) Nutritional intake, housing quality, and sanitation infrastructure

19. Which index accounts for the loss in human development due to internal disparities within a country's population?
(A) Multidimensional Poverty Index
(B) Gender Inequality Index
(C) Inequality-adjusted HDI (IHDI)
(D) Planetary pressures-adjusted HDI

20. Arrange the following steps in the logical sequence of calculating the final Human Development Index (HDI):
1. Calculating the Dimension Indices for health, education, and income.
2. Calculating the Geometric Mean of the three dimension indices.
3. Determining the minimum and maximum values (goalposts) for each indicator.

(A) 1-2-3
(B) 3-1-2
(C) 2-1-3
(D) 3-2-1

21. Which Indian state is frequently cited as the "Kerala Model" for achieving high HDI scores despite relatively lower per capita income?
(A) Tamil Nadu
(B) Punjab
(C) Kerala
(D) Gujarat

22. In the context of economic classification, how are "Healthcare Goods" generally defined?
(A) Goods that only provide luxury services
(B) Services and products designed to maintain or improve health
(C) Commodities sold only in the secondary market
(D) Resources used exclusively for industrial production

23. Which of the following is a fundamental characteristic of a "Public Good" in healthcare?
(A) Excludability
(B) Rivalry
(C) Profit maximization
(D) Non-excludability

24. A healthcare service is considered "non-rival" if:
(A) One's usage does not reduce availability for other people
(B) People can be easily prevented from accessing the service
(C) The service is provided exclusively by the private market
(D) The price of the service is set by market supply and demand

25. Consider the following statements regarding Public Goods in healthcare:
1. They are non-rival in consumption.
2. They are non-excludable in nature.
3. They are typically under-provided by the private market.

Which of the statements given above are correct?
(A) 1 and 2 only
(B) 2 and 3 only
(C) 1 and 3 only
(D) 1, 2, and 3

26. Which of the following is the best example of a "Public Good" in the healthcare sector?
(A) National infectious disease tracking and surveillance system
(B) Specialist medical consultation at a private clinic facility
(C) Elective aesthetic procedures for individual enhancement
(D) Nutritional supplements available for retail purchase only

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S. Inequality

List II: (Indicator)

1. GNI per capita (PPP)
2. Life expectancy at birth
3. IHDI
4. Mean years of schooling

Codes:

(A) P-2, Q-4, R-1, S-3
(B) P-1, Q-2, R-3, S-4
(C) P-4, Q-3, R-2, S-1
(D) P-2, Q-1, R-4, S-3

10. Given below are two statements: one is labelled as Assertion (A) and the other is labelled as Reason (R).

Assertion (A): The income dimension of HDI is measured by Gross National Income (GNI) per capita rather than Gross Domestic Product (GDP) per capita.

Reason (R): GNI reflects the actual income available to the residents of a country, including net income from abroad.

(A) Both A and R are true and R is the correct explanation of A.
(B) Both A and R are true but R is not the correct explanation of A.
(C) A is true but R is false.
(D) A is false but R is true.

11. Why is the Gross National Income (GNI) per capita in HDI expressed in Purchasing Power Parity (PPP) terms?

(A) To control for annual changes in the value of the US dollar currency
(B) To isolate domestic production from the influence of global commerce
(C) To facilitate the specific use of geometric means in final indexing
(D) To adjust for local price differences and the actual cost of living

12. Arrange the following countries in descending order based on the traditional categorization of HDI scores:

1. Medium Human Development
2. Very High Human Development
3. Low Human Development
4. High Human Development

(A) 2-4-1-3
(B) 4-2-1-3
(C) 2-1-4-3
(D) 3-1-4-2

13. The value of the Human Development Index ranges between which of the following scores?

(A) -1 to +1
(B) 0 to 1
(C) 0 to 10
(D) 1 to 100

14. Under the HDI classification, a country with a score of 0.850 would be categorized under which group?

(A) Low Human Development
(B) Medium Human Development
(C) High Human Development
(D) Very High Human Development

15. Match the items in List I with the items in List II and select the correct answer using the codes given below:

List I: (Concept)

P. HDI
Q. GDI
R. GII
S. MPI

List II: (Key Feature)

1. Measures gender gaps in achievements
2. Measures deprivation in health, education, and living standards
3. Measures average achievement in basic dimensions
4. Measures reproductive health, empowerment, and labor market

Codes:

(A) P-3, Q-1, R-4, S-2
(B) P-1, Q-2, R-3, S-4
(C) P-2, Q-4, R-1, S-3
(D) P-3, Q-4, R-2, S-1

16. Which of the following statements is INCORRECT regarding India's HDI ranking trends?

(A) India's HDI value has shown a consistent improvement since 1990.
(B) India's life expectancy at birth has decreased steadily since the 1990s.
(C) India is generally classified in the 'Medium Human Development' category.
(D) India's GNI per capita (PPP) has increased significantly over the decades.

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Codes:
(A) P-3, Q-2, R-4, S-1
(B) P-1, Q-2, R-3, S-4
(C) P-4, Q-3, R-2, S-1
(D) P-2, Q-4, R-1, S-3

36. "Adverse Selection" in health insurance typically leads to which of the following outcomes?
(A) Situations where only the healthiest individuals purchase insurance
(B) Conditions allowing insurance firms to maximize corporate profits
(C) Structural trends leading to significant premium reductions for all
(D) Risk pools that are disproportionately filled with high-risk persons

37. A person getting vaccinated against a contagious disease provides benefits to others who are not vaccinated. This is an example of:
(A) Negative Externality
(B) Moral Hazard
(C) Positive Externality
(D) Adverse Selection

38. Why does the government play a major role in healthcare despite the existence of private hospitals?
(A) To maximize tax revenue from the sick
(B) To address market failures and ensure equity
(C) To prevent the private sector from growing
(D) Because healthcare is a purely private good

39. What is the primary objective of "Universal Health Coverage" (UHC)?
(A) Limiting healthcare access to government employees only
(B) Transferring all medical institutions to private ownership
(C) Reducing the total quantity of medical training colleges
(D) Ensuring quality care for all without financial hardship

40. Consider the following statements regarding Universal Health Coverage:
1. It aims to provide essential health services.
2. It focuses on reducing out-of-pocket expenditure.
3. It is only applicable to developed nations.

Which of the statements given above are correct?
(A) 1 and 2 only
(B) 2 and 3 only
(C) 1 and 3 only
(D) 1, 2, and 3

41. In the context of India, what is "Out-of-Pocket Expenditure" (OOPE)?
(A) Total fiscal resources allocated to the public healthcare system
(B) International grants provided by global development organizations
(C) Direct cash payments by users to providers at the point of care
(D) Compulsory health taxes collected through federal income filings

42. How does health insurance primarily help in reducing the healthcare burden on the poor?
(A) Offering protection against catastrophic medical costs
(B) Increasing the market price of pharmaceutical goods
(C) Capping the total number of practicing rural doctors
(D) Incentivizing citizens to bypass hospital treatments

43. Which of the following is NOT a dimension of the Human Development Index?
(A) Health
(B) Education
(C) Standard of Living
(D) Environmental Sustainability

44. Which indicator is used as a proxy for the 'Standard of Living' in the HDI?
(A) Annual domestic product expansion rate
(B) Gross National Income per capita at PPP
(C) Nationwide labor force participation rate
(D) Central bank foreign currency holdings

45. Consider the following statements regarding the Multidimensional Poverty Index (MPI):
1. It uses health, education, and living standards as dimensions.
2. It was developed by OPHI and UNDP.
3. It measures poverty only based on daily income of $1.90.

Which of the statements given above are correct?
(A) 1 and 2 only

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(B) 2 and 3 only
(C) 1 and 3 only
(D) 1, 2, and 3

46. Given below are two statements: one is labelled as Assertion (A) and the other is labelled as Reason (R).
Assertion (A): High out-of-pocket expenditure can push households into poverty.
Reason (R): Lack of comprehensive health insurance coverage in India forces the poor to spend their savings on healthcare.
(A) Both A and R are true and R is the correct explanation of A.
(B) Both A and R are true but R is not the correct explanation of A.
(C) A is true but R is false.
(D) A is false but R is true.

47. In the calculation of HDI, which of the following is used to aggregate the three dimension indices?
(A) Geometric Mean
(B) Arithmetic Mean
(C) Harmonic Mean
(D) Weighted Average

48. What is the relationship between HDI and IHDI when there is perfect equality in a country?
(A) IHDI is greater than HDI
(B) IHDI is equal to HDI
(C) IHDI is half of HDI
(D) IHDI is always zero

49. Match the items in List I with the items in List II and select the correct answer using the codes given below:
List I: (Term)
P. Human Development Index
Q. Multidimensional Poverty Index
R. IHDI
S. First HDR Publication
List II: (Associated Organization/Person)
1. UNDP and OPHI
2. Mahbub ul Haq
3. 1990
4. Inequality adjustment
Codes:
(A) P-2, Q-1, R-4, S-3
(B) P-1, Q-2, R-3, S-4
(C) P-4, Q-3, R-2, S-1
(D) P-3, Q-4, R-1, S-2

50. Given below are two statements: one is labelled as Assertion (A) and the other is labelled as Reason (R).
Assertion (A): Healthcare markets often suffer from market failure.
Reason (R): Information asymmetry between doctors and patients leads to inefficient outcomes.
(A) Both A and R are true and R is the correct explanation of A.
(B) Both A and R are true but R is not the correct explanation of A.
(C) A is true but R is false.
(D) A is false but R is true.

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51. Which of the following is true about the 'Mean Years of Schooling' indicator?
(A) It quantifies the forecasted years of education for a 5-year-old child
(B) It focuses exclusively on the completion of primary level schooling
(C) It averages the education years completed by those aged 25 and older
(D) It serves as a metric for current literacy rates among the youth

52. Arrange the following in the chronological order of their introduction/first publication:
1. First Human Development Report
2. Multidimensional Poverty Index (MPI)
3. Inequality-adjusted HDI (IHDI)
(A) 1-2-3
(B) 2-1-3
(C) 3-1-2
(D) 1-3-2

53. The Inequality-adjusted Human Development Index (IHDI) was introduced in which Human Development Report?
(A) 1990
(B) 2000
(C) 2010
(D) 2020

54. India's global position in HDI is often compared with its BRICS peers. Which of the following statements is generally true?
(A) India reports the highest HDI score among the BRICS member nations
(B) India's score is lower than that of the Russian and Chinese states

(C) India maintains an HDI level identical to that of the South African state
(D) India belongs strictly to the category of 'Very High' human development

55. Match the items in List I with the items in List II and select the correct answer using the codes given below:
List I: (Good Type)
P. Public Good
Q. Private Good
R. Merit Good
S. Toll Good
List II: (Example)
1. Specialized surgery
2. Clean air/Disease eradication
3. Primary Education
4. Private Health Club
Codes:
(A) P-2, Q-1, R-3, S-4
(B) P-1, Q-2, R-3, S-4
(C) P-4, Q-3, R-2, S-1
(D) P-3, Q-4, R-1, S-2

56. Positive externalities in healthcare mean that:
(A) The social benefit of a service exceeds the specific private benefit
(B) The direct private cost remains higher than the resulting social cost
(C) Benefits of a service are limited to the individual paying for them
(D) Government revenue is diminished by the provision of public services

57. When a patient undergoes unnecessary tests because their insurance covers the cost, it is an example of:
(A) Positive Externality
(B) Adverse Selection
(C) Moral Hazard
(D) Public Good

58. Which of the following is an example of a "Non-excludable" healthcare service?
(A) Public health information and awareness broadcast campaigns
(B) Accommodation in a private or semi-private hospital suite
(C) High-complexity procedures such as a heart transplant surgery
(D) Procurement of specific prescription-based antibiotic drugs

59. A healthcare resource is "rival" if:
(A) Preventing other people from utilizing the resource is impossible
(B) Provision is shared between state and private healthcare entities
(C) The resource is distributed without an associated market price
(D) Use by one individual precludes its simultaneous use by another

60. Which of the following best describes the "Kerala Model" of development?
(A) Rapid economic expansion driven primarily by heavy industrial output
(B) High social indicator scores despite moderate levels of economic growth
(C) Minimal literacy achievements coupled with high per capita earnings
(D) Total reliance on private markets for all essential healthcare needs

61. Which organization calculates the Multidimensional Poverty Index (MPI)?
(A) The International Bank for Reconstruction and Development
(B) The United Nations International Children's Emergency Fund
(C) UNDP and the Oxford Poverty and Human Development Initiative
(D) The United Nations Educational, Scientific and Cultural Organization

62. Who assisted Mahbub ul Haq in developing the Human Development Index?
(A) Milton Friedman
(B) John Maynard Keynes
(C) Adam Smith
(D) Amartya Sen

63. If a country has an HDI score of 0.450, it falls under which category?
(A) Low Human Development
(B) Very High Human Development
(C) High Human Development
(D) Medium Human Development

64. GNI per capita in HDI is adjusted for Purchasing Power Parity (PPP) to:
(A) Increase the relative ranking of developing

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nations in an artificial manner
(B) Facilitate a comparison of real buying power across various currencies
(C) Determine the aggregate Gross Domestic Product of a sovereign nation
(D) Quantify the annual rate of inflation impacting a specific local currency

65. Consider the following statements regarding Market Failure in healthcare:
1. It occurs due to the presence of externalities.
2. Information asymmetry is a major cause.
3. It results in an efficient allocation of resources by the private sector.

Which of the statements given above are correct?
(A) 1 and 2 only
(B) 2 and 3 only
(C) 1 and 3 only
(D) 1, 2, and 3

66. The Gender Development Index (GDI) is the ratio of:
(A) Female HDI to Male HDI
(B) Male HDI to Female HDI
(C) Female Literacy to Male Literacy
(D) Female GNI to Male GNI

67. Which of the following is the highest possible score in the HDI?
(A) 0.1
(B) 1.0
(C) 10.0
(D) 100

68. Why is healthcare considered a "Merit Good"?
(A) Because it generates high levels of tax revenue for the state
(B) Because access is granted only to those with demonstrated merit
(C) Because it is defined as a non-rival and non-excludable service
(D) Because market mechanisms lead to individual under-consumption

69. Toll goods in healthcare are characterized by:
(A) Non-excludability and Non-rivalry
(B) Excludability and Non-rivalry
(C) Non-excludability and Rivalry
(D) Excludability and Rivalry

70. Given below are two statements: one is labelled as Assertion (A) and the other is labelled as Reason (R).
Assertion (A): Vaccination programs are often funded by the government.
Reason (R): Vaccinations produce significant positive externalities, which the private market fails to account for.
(A) Both A and R are true and R is the correct explanation of A.
(B) Both A and R are true but R is not the correct explanation of A.
(C) A is true but R is false.
(D) A is false but R is true.

71. The Multidimensional Poverty Index (MPI) complements the HDI by:
(A) Focusing exclusively on the measurement of income-based metrics
(B) Tabulating the total concentration of wealth among billionaires
(C) Omitting health indicators from its core evaluative framework
(D) Identifying household-level deprivations across specific dimensions

72. "Expected Years of Schooling" is an indicator for which group of people?
(A) Children of school-entry age
(B) Adults over 25 years
(C) University graduates
(D) Working-age population

73. Which of the following differentiates a Public Good from a Private Good?
(A) Public goods are universally free whereas private goods are costly
(B) Private goods are manufactured and sold only by state authorities
(C) Public goods are defined by non-excludability and non-rivalry
(D) Public goods offer no measurable benefits to the broader society

74. Which of the following is INCORRECT regarding "Adverse Selection"?
(A) It encourages a balanced risk pool of both healthy and sick members
(B) It takes place prior to the formal signing of an insurance contract
(C) It is fundamentally caused by the presence

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of hidden information
(D) It carries the potential to trigger a total collapse of insurance markets

75. Match the items in List I with the items in List II and select the correct answer using the codes given below:
List I: (Market Concept)
P. Positive Externality
Q. Information Asymmetry
R. Out-of-pocket expenditure
S. Health Insurance
List II: (Impact)
1. Financial protection
2. Supplier-induced demand
3. Under-production by market
4. Financial burden on poor
Codes:
(A) P-3, Q-2, R-4, S-1
(B) P-1, Q-2, R-3, S-4
(C) P-4, Q-3, R-2, S-1
(D) P-2, Q-4, R-1, S-3

76. Universal Health Coverage (UHC) focuses on which of the following?
(A) Access to quality health services
(B) Protection against financial risk
(C) Coverage for all citizens
(D) Ensuring all citizens obtain health services without financial suffering

77. High Out-of-Pocket Expenditure (OOPE) in India is primarily a result of:
(A) Excessive levels of fiscal spending by the government on health
(B) Universal coverage of the population by free state insurance plans
(C) Dependence on private providers and low insurance penetration
(D) The classification of healthcare as a pure public good in India

78. The Gender Inequality Index (GII) value ranges from 0 to 1. What does a value of 0 represent?
(A) Maximum inequality
(B) Perfect gender equality
(C) High maternal mortality
(D) Low female labor participation

79. Which dimension of HDI is measured using GNI per capita?
(A) Standard of Living
(B) Health
(C) Education
(D) Gender Equity

80. "Life expectancy at birth" is defined as:
(A) The mean age of all individuals who died during a single year
(B) The expected lifespan of a newborn under current mortality trends
(C) The highest age recorded by any citizen within a specific country
(D) The ratio of the population that lives beyond the age of sixty

81. Which trend has been observed in India's HDI value over the last three decades?
(A) Stagnation at 0.300
(B) Consistent upward trend
(C) Rapid decline due to economic reforms
(D) Fluctuating without any clear direction

82. Education dimension in HDI is a combination of how many indicators?
(A) One
(B) Two
(C) Three
(D) Four

83. Purchasing Power Parity (PPP) is used in HDI because:
(A) Global currency exchange rates remain perfectly stable over time
(B) It is a mandatory requirement set by the World Bank's economists
(C) A single dollar buys varying amounts of goods in different nations
(D) It provides a measure of the total aggregate volume of national exports

84. A country with an HDI score of 0.750 is classified as:
(A) Low Human Development
(B) Medium Human Development
(C) High Human Development
(D) Very High Human Development

85. Consider the following statements regarding Healthcare as a Merit Good:
1. Individuals might not fully value the benefits of healthcare.

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measured by parliamentary seats and secondary education attainment. Labor market participation tracks the economic involvement of both genders, providing a comprehensive view of gender-based disadvantages and opportunities.

19. (C) Inequality-adjusted HDI (IHDI)
The Inequality-adjusted Human Development Index provides a realistic measure of development by accounting for how achievements are distributed among a country's population. It discounts the average score of each dimension according to its level of inequality. When there is no inequality, the value matches the standard index, but significant internal disparities cause the adjusted value to fall accordingly.

20. (B) 3-1-2
Calculating the index involves a structured three-step process. First, minimum and maximum values, known as goalposts, are determined for each indicator to normalize the data. Second, individual dimension indices for health, education, and income are calculated using these benchmarks. Finally, the geometric mean of these three indices is taken to produce the final composite human development score.

21. (C) Kerala
Kerala is renowned for its unique developmental trajectory, often called the Kerala Model. The state has achieved high social indicators, such as near-universal literacy and high life expectancy, comparable to many developed nations. These successes were achieved through sustained public investment in social sectors, even during periods when the state's per capita income was relatively modest compared to others.

22. (B) Services and products designed to maintain or improve health
Healthcare goods encompass a wide range of commodities and services specifically intended to promote, maintain, or restore physical and mental well-being. This category includes pharmaceutical drugs, medical devices, surgical procedures, and preventative screenings. Unlike luxury items, these goods are essential for human survival and productivity, often requiring specialized knowledge for their effective delivery and consumption by various individuals.

23. (D) Non-excludability
Public goods are defined by two primary characteristics: non-excludability and non-rivalry. Non-excludability means that it is difficult or impossible to prevent individuals from using the good once it is provided, regardless of whether they have paid for it. This feature often leads to market failure, necessitating government intervention to ensure these essential services are adequately supplied to society.

24. (A) One's usage does not reduce availability for other people
A service is considered non-rival if the consumption by one person does not diminish the quantity or quality available to others. For instance, an awareness campaign about public health can be consumed by many individuals simultaneously without depleting the resource. This characteristic distinguishes public goods from private goods, where one person's consumption physically prevents another from using it.

25. (D) 1, 2, and 3
Public goods are both non-rival in consumption and non-excludable in nature. Because private companies cannot easily charge users or prevent non-payers from benefiting, these goods are typically under-provided by the free market. Consequently, the government often takes responsibility for their provision to ensure that the entire population benefits from these socially valuable and essential public services.

26. (A) National infectious disease tracking and surveillance system
A national disease surveillance system is a classic example of a public good because its benefits are shared by the entire population. It is non-excludable, as everyone benefits from the containment of outbreaks, and non-rival, as one person benefiting from the information does not reduce its availability to others. Such systems are vital for maintaining national health security.

27. (D) Access is restricted to those who pay the required price point
Private healthcare goods are excludable because the provider can prevent individuals who do not pay from accessing the service or product. For example, a surgery or a specific medication is

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95. Match the items in List I with the items in List II and select the correct answer using the codes given below:
List I: (HDI Category)
P. Very High
Q. High
R. Medium
S. Low
List II: (Score Range)
1. Below 0.550
2. 0.550 – 0.699
3. 0.700 – 0.799
4. 0.800 and above
Codes:
(A) P-4, Q-3, R-2, S-1
(B) P-1, Q-2, R-3, S-4
(C) P-4, Q-3, R-2, S-1
(D) P-3, Q-4, R-1, S-2

96. Which of the following is a component of Universal Health Coverage?
(A) Financial risk protection
(B) Access to essential quality health-care services
(C) Access to safe, effective, and affordable essential medicines
(D) Integrated access to quality services, medicines, and financial protection

97. Out-of-pocket expenditure (OOPE) is considered a burden because:
(A) It significantly lowers the government's annual tax collection
(B) It triggers catastrophic health costs for impoverished families
(C) It results in an increase in the personal wealth of clinicians
(D) It is a cost exclusively borne by the most affluent households

98. Gender Inequality Index (GII) takes into account which of the following?
(A) Maternal Mortality Ratio
(B) Adolescent Birth Rate
(C) Share of parliamentary seats held by women
(D) Indicators of reproductive health, empowerment, and labor status

99. The "Health" dimension index in HDI is calculated using which formula?
(A) (Actual value - Minimum value) / (Maximum value - Minimum value)
(B) (Maximum value - Actual value) / (Maximum value - Minimum value)
(C) Actual value / Maximum value
(D) Minimum value / Actual value

100. In which type of healthcare good is it easy to exclude those who do not pay?
(A) Public Good
(B) Common Property Resource
(C) Global Public Good
(D) Private Good

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2. The government should provide it to ensure social equity.
3. It is a good that the market provides in excessive quantities.

Which of the statements given above are correct?
(A) 1 and 2 only
(B) 2 and 3 only
(C) 1 and 3 only
(D) 1, 2, and 3

86. Which of the following is a classic example of "Positive Externality" in public health?
(A) Smoking in public places
(B) Mass immunization against COVID-19
(C) Industrial water pollution
(D) Selling expired medicines

87. Moral hazard in health insurance is best described as:
(A) High-risk individuals attempting to secure additional coverage
(B) Clinicians practicing price discrimination among various patients
(C) State agencies providing subsidized insurance to low-income groups
(D) Increased service usage by individuals due to insurance coverage

88. Which of the following is "Non-excludable" but "Rival"?
(A) Common pool resources such as a heavily crowded public clinic
(B) Pure public goods like national defense or lighthouses
(C) Private commodities such as food or individualized services
(D) Toll goods that require membership but allow shared use

89. Private goods in healthcare are:
(A) Non-rival and non-excludable
(B) Non-rival and excludable
(C) Rival and excludable
(D) Rival and non-excludable

90. Given below are two statements: one is labelled as Assertion (A) and the other is labelled as Reason (R).
Assertion (A): The Kerala model of development focuses heavily on the social sector.
Reason (R): Kerala has achieved high literacy and life expectancy despite not being the richest state in India.
(A) Both A and R are true and R is the correct explanation of A.
(B) Both A and R are true but R is not the correct explanation of A.
(C) A is true but R is false.
(D) A is false but R is true.

91. Which index measures the deprivation in the same three dimensions as HDI but at the household level?
(A) GDI
(B) GII
(C) IHDI
(D) MPI

92. The "Knowledge" dimension in HDI is measured by:
(A) Literacy rate percentage of the adult population
(B) Mean schooling years and expected schooling years
(C) Total count of operational universities in a nation
(D) Public and private spending on research activities

93. Which of the following is a private good in healthcare?
(A) National programs for total disease eradication
(B) Efforts to maintain the purity of atmospheric air
(C) A one-on-one medical consultation with a specialist
(D) General public health and hygiene awareness campaigns

94. What is the main cause of "Information Asymmetry" in medicine?
(A) Patients possessing superior health knowledge compared to clinicians
(B) State regulations that restrict data access for medical professionals
(C) Insurance firms that conceal the specific details of health policies
(D) Specialized medical training that creates a provider knowledge gap

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healthy life is measured by life expectancy at birth, while knowledge is assessed through schooling metrics. A decent standard of living utilizes GNI per capita. Inequality within these achievements is reflected through the Inequality-adjusted Human Development Index, which accounts for significant internal disparities.

10. (A) Both A and R are true and R is the correct explanation of A.
Gross National Income per capita is preferred over Gross Domestic Product in human development measurements because it accounts for income flowing into a country. This includes remittances and net income from abroad, providing a more accurate picture of the resources available to residents. Consequently, GNI better represents the actual economic capacity of people to live a decent life.

11. (D) To adjust for local price differences and the actual cost of living
Purchasing Power Parity is applied to income data to ensure a fair comparison between countries with different price levels. It adjusts for the fact that a dollar can buy more goods in a developing country than in a developed one. This conversion allows the Human Development Index to reflect the real purchasing power and standard of living.

12. (A) 2-4-1-3
Countries are classified into four distinct groups based on their composite scores. The highest tier is Very High Human Development, followed by High and then Medium categories. The final group is Low Human Development, representing nations with the lowest scores. This hierarchy allows for global comparisons and identifies regions requiring prioritized developmental interventions and targeted policy improvements.

13. (B) 0 to 1
The Human Development Index is a normalized value that strictly ranges between zero and one. A score closer to one indicates a higher level of development and better achievements in health, education, and income. Conversely, a value approaching zero reflects lower development. This standardized scale enables consistent global rankings and tracks the progress of various nations over time.

14. (D) Very High Human Development
Any nation achieving a score of 0.800 or higher is officially classified under the Very High Human Development category. This threshold signifies significant progress in providing quality healthcare, advanced education systems, and substantial income levels for its citizens. Countries in this tier typically have high life expectancy and extensive schooling years, reflecting advanced social and economic infrastructure.

15. (A) P-3, Q-1, R-4, S-2
Various indices serve different purposes in measuring progress. The Human Development Index focuses on average achievements in basic dimensions. The Gender Development Index measures gaps between men and women, while the Gender Inequality Index evaluates reproductive health and empowerment. Finally, the Multidimensional Poverty Index identifies specific household deprivations in health, education, and standard of living across populations.

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16. (B) India's life expectancy at birth has decreased steadily since the 1990s.
Since 1990, India has experienced a consistent upward trend in its overall human development value. This progress is characterized by a significant rise in gross national income per capita and expanded access to education. Contrary to declining trends, the life expectancy at birth in India has actually improved steadily over the past few decades due to better healthcare services.

17. (B) Gender Development Index
The Gender Development Index was specifically designed to adjust the Human Development Index for disparities between women and men. It calculates the ratio of the female index to the male index across health, education, and income. This metric highlights how gender-based inequalities hinder the overall human potential of a nation and guides policies aimed at achieving parity.

18. (A) Reproductive health, empowerment, and labor market participation
The Gender Inequality Index evaluates three critical dimensions to measure the loss in human development due to inequality. Reproductive health is assessed through maternal mortality and adolescent birth rates. Empowerment is

ANSWERS

1. (B) Mahbub ul Haq
Mahbub ul Haq, a pioneering Pakistani economist, is the primary visionary behind the Human Development Index. He introduced this metric to shift the focus of global development from purely economic indicators like GDP to people-centric progress. This framework emphasizes that people are the ultimate wealth of a nation and that development must expand their choices.

2. (B) 1990
The inaugural Human Development Report was released in 1990 by the United Nations Development Programme. This publication marked a significant shift in global development discourse by introducing the Human Development Index. It established a new standard for evaluating the well-being of countries beyond traditional economic growth, focusing instead on essential aspects like life expectancy and education.

3. (C) United Nations Development Programme
The United Nations Development Programme is the international organization tasked with the annual publication of the Human Development Report. This global agency coordinates developmental efforts across nations and uses the report to track progress in human capabilities. Through this document, it provides comprehensive data on health, education, and living standards, influencing major policy decisions worldwide.

4. (B) Three
The Human Development Index is constructed using three core dimensions that represent essential human capabilities. These fundamental pillars include a long and healthy life, access to knowledge, and a decent standard of living. By integrating these three facets into a single composite score, the index provides a broad and consistent view of a country's overall human development status.

5. (C) 1 and 3 only
The Human Development Index evaluates health using life expectancy at birth as the primary indicator. Education is measured through a combination of mean years of schooling for adults and expected years of schooling for children. While income is a component, it specifically uses Gross National Income per capita rather than Gross Domestic Product to reflect the living standards.

6. (B) Life Expectancy at Birth
Life expectancy at birth is the specific metric utilized to assess the health dimension within the Human Development Index framework. This indicator reflects the average number of years a newborn is expected to live if current mortality patterns remain constant. It serves as a proxy for the overall health environment and the general quality of medical services available.

7. (D) 25 years and older
Mean years of schooling is calculated by averaging the number of years of education completed by adults aged twenty-five and older. This indicator provides a reliable assessment of the current educational attainment of the adult population in a country. It differs from expected years of schooling, which focuses on the future educational prospects of children starting their formal education.

8. (A) Total years of schooling a child at entrance age is likely to attain
Expected years of schooling represents the total duration of education a child of school-entry age can expect to receive based on current enrollment patterns. This forward-looking indicator estimates the potential academic attainment of the younger generation. It complements the mean years of schooling indicator by capturing the impact of current educational policies and enrollment rates for children.

9. (A) P-2, Q-4, R-1, S-3
The Human Development Index maps specific indicators to its core dimensions. A long and

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only available to those who can afford the market price. This ability to exclude non-payers allows the private market to function through direct transactions between the buyers and sellers.

28. (B) Private Good
Private goods are defined by the twin characteristics of rivalry and excludability. Rivalry implies that the consumption of the good by one person precludes its use by another, such as a specific dose of medicine. Excludability means that access is restricted to those who pay for it. Most medical treatments and pharmaceutical products sold in the market fall into this category.

29. (C) It provides social value and warrants use regardless of income
Healthcare is classified as a merit good because it is deemed socially desirable and provides benefits that individuals might undervalue. Society believes that everyone should have access to these services regardless of their ability to pay. Because individuals often under-consume merit goods in a free market, governments intervene through subsidies or direct provision to ensure widespread and equitable access.

30. (A) Both A and R are true and R is the correct explanation of A.
Merit goods like healthcare often require government intervention because the free market tends to under-provide them. Individuals may fail to recognize the long-term personal and social benefits of healthcare, leading to lower consumption than is socially optimal. By providing or subsidizing these services, the government ensures that the population remains healthy, which ultimately benefits the entire nation's productivity.

31. (A) Medical facility access restricted to paying members
Toll goods, also known as club goods, are excludable but non-rival up to a point of congestion. A private health club or a specialized medical facility restricted to members who pay a fee is a clear example. While members can share the facilities without significantly reducing each other's benefits, those who do not pay the membership fee are effectively excluded.

32. (B) Toll Good — Non-excludable
Toll goods are characterized by being excludable but non-rival. This means that providers can prevent individuals from using the service if they do not pay, but one person's use does not necessarily diminish another's experience. In contrast, public goods are both non-excludable and non-rival. Therefore, labeling a toll good as non-excludable is fundamentally incorrect within standard economic theory.

33. (B) Imbalance where providers have more expertise than their patients
Information asymmetry occurs in healthcare because doctors possess specialized knowledge and expertise that patients do not. This imbalance means patients must rely on providers to diagnose conditions and recommend appropriate treatments. Such a gap can lead to market failures, where providers might induce demand for unnecessary services, as the consumer lacks the technical background to evaluate the necessity.

34. (A) Increased risk-taking after obtaining insurance
Moral hazard refers to the change in behavior that occurs when an individual is protected from the full financial consequences of their actions. In healthcare, insured persons might take more health risks or consume more medical services than necessary because they do not bear the direct cost. This phenomenon can lead to inefficiencies and higher overall costs for the insurance system.

35. (A) P-3, Q-2, R-4, S-1
Market failures in healthcare stem from various sources. Externalities involve impacts on third parties, while moral hazard refers to behavioral changes after obtaining insurance. Adverse selection occurs when high-risk individuals are more likely to seek coverage. Information asymmetry describes the knowledge gap between parties. Understanding these concepts is crucial for designing effective health policies and interventions to improve overall efficiency.

36. (D) Risk pools that are disproportionately filled with high-risk persons
Adverse selection occurs when individuals with a higher risk of needing medical care are more likely to purchase insurance than healthy individuals. This imbalance can lead to a risk

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Index score. Countries like Russia, Brazil, and China typically fall into the "High" or "Very High" development categories, while India is usually classified in the "Medium" category. This difference highlights the varying levels of progress in health, education, and income achievements among these major emerging economies.

55. (A) P-2, Q-1, R-3, S-4
Different healthcare services fall into various economic categories based on their characteristics. Clean air and disease eradication are public goods due to their non-rival and non-excludable nature. Specialized surgery is a private good because it is both rival and excludable. Primary education is considered a merit good for its social value, while private health clubs function as toll or club goods.

56. (A) The social benefit of a service exceeds the specific private benefit
Positive externalities occur when the total benefit to society from a service is greater than the private benefit received by the individual consumer. In healthcare, an individual's decision to seek treatment or vaccination often reduces the risk of illness for others. Because these external benefits are not reflected in prices, such services are often subsidized to encourage optimal consumption levels.

57. (C) Moral Hazard
When a patient undergoes unnecessary medical tests simply because their insurance covers the cost, it is a clear example of moral hazard. Since the individual does not pay the full price for the service, they have less incentive to avoid excessive or unnecessary consumption. This behavior increases the overall costs of the healthcare system and leads to inefficiencies in resource allocation.

58. (A) Public health information and awareness broadcast campaigns
Public health awareness campaigns, such as those broadcast on television or radio, are non-excludable because once they are aired, it is impossible to prevent anyone from receiving the information. These campaigns provide essential health knowledge to the general public, regardless of whether they have paid for it. This characteristic makes them a vital tool for governments to promote healthy behaviors.

59. (D) Use by one individual precludes its simultaneous use by another
A healthcare resource is considered rival if its use by one person directly prevents or reduces the ability of another person to use it at the same time. For example, a single hospital bed or a specific dose of a vaccine can only be used by one patient at a time. Rivalry is a key feature of private goods and common resources.

60. (B) High social indicator scores despite moderate levels of economic growth
The Kerala Model is characterized by exceptional achievements in social sectors like education and health, despite the state having only moderate levels of economic wealth. This model demonstrates that high human development can be achieved through strong public policy, social activism, and government commitment to welfare, even in the absence of rapid industrialization or extremely high per capita income levels.

61. (C) UNDP and the Oxford Poverty and Human Development Initiative
The Multidimensional Poverty Index is calculated through a collaboration between the United Nations Development Programme and the Oxford Poverty and Human Development Initiative. This index provides a comprehensive picture of poverty by identifying deprivations across health, education, and living standards at the household level. It helps policymakers identify who is poor and how they are experiencing poverty in various contexts.

62. (D) Amartya Sen
Nobel laureate Amartya Sen played a pivotal role in assisting Mahbub ul Haq with the conceptual development of the Human Development Index. Sen's "capability approach" provided the theoretical foundation for the index, arguing that development should be measured by the real freedoms and opportunities people have. Their collaboration fundamentally changed how global progress is understood and measured internationally.

63. (A) Low Human Development
According to the classification system used by the UNDP, any country with a Human Development Index score below 0.550 is placed in the Low

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income-based measures, the MPI captures the complex nature of poverty by looking at overlapping disadvantages experienced by individuals.

46. (A) Both A and R are true and R is the correct explanation of A.
High out-of-pocket expenditure is a significant factor that pushes many Indian households into poverty. Because a large portion of the population lacks comprehensive health insurance, they are often forced to use their life savings or take loans to pay for medical emergencies. This lack of financial protection turns health crises into economic disasters, particularly for those in lower-income brackets.

47. (A) Geometric Mean
Since 2010, the Human Development Index has used the geometric mean to aggregate its three dimension indices. This method replaced the arithmetic mean to ensure that poor performance in one dimension is not completely offset by high performance in another. The geometric mean reflects the interconnectedness of dimensions and penalizes uneven progress, encouraging countries to improve across all three areas.

48. (B) IHDI is equal to HDI
The Inequality-adjusted Human Development Index is designed to account for disparities in health, education, and income within a nation. In a hypothetical scenario where there is perfect equality across all three dimensions, the IHDI would be exactly equal to the standard HDI. However, in reality, most countries have some level of inequality, which causes the IHDI to be lower.

49. (A) P-2, Q-1, R-4, S-3
The Human Development Index was pioneered by Mahbub ul Haq, while the Multidimensional Poverty Index is a joint effort by UNDP and OPHI. The Inequality-adjusted HDI was introduced to refine the measure by accounting for internal disparities. The first Human Development Report was published in 1990, establishing the foundation for these comprehensive metrics that assess global human progress.

50. (A) Both A and R are true and R is the correct explanation of A.
Healthcare markets frequently experience failure because they do not meet the conditions of a perfectly competitive market. A primary reason is information asymmetry, where doctors have more knowledge than patients, potentially leading to inefficient outcomes like over-treatment. This imbalance makes it difficult for consumers to make fully informed choices, necessitating regulation and public intervention to ensure efficiency and fairness.

51. (C) It averages the education years completed by those aged 25 and older
Mean years of schooling is a critical indicator of the educational attainment of a country's adult population. It is calculated as the average number of years of education received by people aged twenty-five and older throughout their lives. This measure provides insight into the existing skill level and knowledge base of the workforce, reflecting decades of previous investment in education.

52. (A) 1-2-3
The evolution of human development metrics began with the first Human Development Report in 1990. Decades later, the 2010 report introduced significant updates to the measurement framework. This included the launch of the Multidimensional Poverty Index to capture household-level deprivations and the Inequality-adjusted Human Development Index to account for internal disparities. These innovations provided a more nuanced view.

53. (C) 2010
The Inequality-adjusted Human Development Index was officially introduced in the 2010 Human Development Report. This marked the twentieth anniversary of the report and represented a major methodological shift. By incorporating inequality into the core measurement, the UNDP aimed to provide a more accurate reflection of the actual level of human development experienced by people within a country.

54. (B) India's score is lower than that of the Russian and Chinese states
When compared with other BRICS nations, India generally reports a lower Human Development

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pool dominated by high-risk persons, forcing insurers to raise premiums. If premiums become too high, even more healthy people may leave the pool, potentially causing the entire insurance market to fail.

37. (C) Positive Externality
A positive externality exists when an individual's action provides benefits to others without them having to pay for it. When a person gets vaccinated, they not only protect themselves but also reduce the likelihood of spreading the disease to others. This collective protection, known as herd immunity, is a significant social benefit that the private market often fails to value.

38. (B) To address market failures and ensure equity
Government involvement in healthcare is essential to correct market failures such as information asymmetry, externalities, and the under-provision of public goods. Additionally, the state intervenes to ensure equity, making sure that essential services are accessible to all citizens regardless of their socioeconomic status. Without public oversight, the healthcare market would likely exclude the poor and focus only on profitable services.

39. (D) Ensuring quality care for all without financial hardship
The primary goal of Universal Health Coverage is to ensure that all individuals and communities receive the health services they need without suffering financial hardship. This includes the full spectrum of essential, quality health services from health promotion to prevention, treatment, rehabilitation, and palliative care. UHC aims to bridge the gap between healthcare needs and the ability to pay.

40. (A) 1 and 2 only
Universal Health Coverage focuses on providing essential health services to the entire population while specifically aiming to reduce out-of-pocket expenditure. By offering financial protection, it prevents people from falling into poverty due to medical costs. Although it is a major goal for developing countries, UHC is a universal target applicable to all nations, regardless of their level of development.

41. (C) Direct cash payments by users to providers at the point of care
Out-of-pocket expenditure refers to the direct payments made by individuals to healthcare providers at the time of service. This includes costs for consultations, diagnostic tests, and medicines that are not covered by insurance or public funding. In India, high levels of such spending are a major concern, as they can lead to financial catastrophe for low-income households.

42. (A) Offering protection against catastrophic medical costs
Health insurance serves as a financial safety net by pooling risks and reducing the burden of large, unexpected medical expenses. For the poor, a single major illness can deplete savings and lead to debt. Insurance helps mitigate this risk by covering a significant portion of hospital costs, thereby preventing catastrophic expenditures and ensuring that medical needs do not lead to poverty.

43. (D) Environmental Sustainability
The Human Development Index is composed of three specific dimensions: health, education, and standard of living. While environmental sustainability is a critical aspect of global development, it is not currently a direct component of the core HDI calculation. Other indices have been developed to account for environmental factors, but the traditional HDI remains focused on fundamental human capabilities.

44. (B) Gross National Income per capita at PPP
Gross National Income per capita, adjusted for Purchasing Power Parity, is used as the indicator for the standard of living in the Human Development Index. This metric reflects the average economic resources available to each citizen, accounting for differences in the cost of living across countries. It provides a more comprehensive view of economic well-being than simple gross domestic product figures.

45. (A) 1 and 2 only
The Multidimensional Poverty Index, developed by the Oxford Poverty and Human Development Initiative and the UNDP, identifies multiple deprivations at the household level. It uses the same three dimensions as the HDI: health, education, and living standards. Unlike simple

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Human Development category. This score reflects significant challenges in areas such as life expectancy, access to education, and income levels. Nations in this category often require substantial international support and focused internal reforms to improve status.

64. (B) Facilitate a comparison of real buying power across various currencies
Adjusting Gross National Income per capita for Purchasing Power Parity is essential for making meaningful international comparisons. Because price levels vary significantly between countries, a simple exchange rate conversion would not accurately reflect what people can actually afford. PPP accounts for these local price differences, allowing the index to measure the real purchasing power and standard of living.

65. (A) 1 and 2 only
Market failure in the healthcare sector is primarily driven by factors such as positive externalities and significant information asymmetry between providers and patients. These issues prevent the private market from achieving an efficient allocation of resources on its own. Consequently, market mechanisms often lead to either the under-provision of essential services or the over-provision of unnecessary and costly medical treatments.

66. (A) Female HDI to Male HDI
The Gender Development Index is calculated as the ratio of the female Human Development Index to the male Human Development Index. This metric reveals the extent to which women are catching up with men in the three basic dimensions of health, education, and income. A value closer to one indicates greater gender equality in human development achievements within a country.

67. (B) 1.0
The Human Development Index is a normalized measure with a scale that ranges from zero to one. A score of 1.0 represents the highest possible level of achievement across all three dimensions of health, education, and income. While no country has reached a perfect score of one, those in the "Very High" category strive to move closer over time.

68. (D) Because market mechanisms lead to individual under-consumption
Healthcare is considered a merit good because the free market often fails to ensure optimal consumption levels. Individuals may not fully appreciate the long-term benefits of healthcare services or may lack the financial means to access them. Because society places a high value on health, governments step in to encourage consumption through subsidies, public provision, and mandatory insurance.

69. (B) Excludability and Non-rivalry
Toll goods, often referred to as club goods, are characterized by being excludable but non-rival. This means that access to the good can be restricted to those who pay a fee or "toll," but once access is granted, one person's use does not significantly diminish the experience of others. Private medical facilities that require membership fees are typical examples in healthcare.

70. (A) Both A and R are true and R is the correct explanation of A.
Vaccination programs are frequently funded and managed by governments because they generate substantial positive externalities. When individuals are vaccinated, they contribute to the collective safety of the community by slowing the spread of disease. Since the private market does not account for these broad social benefits, it would likely under-provide vaccines without government intervention to ensure widespread coverage.

71. (D) Identifying household-level deprivations across specific dimensions
The Multidimensional Poverty Index complements the Human Development Index by providing a more detailed look at the nature of poverty. While the HDI measures average achievements at the national level, the MPI identifies specific, overlapping deprivations that households face in health, education, and living standards. This granular approach allows policymakers to better understand and target the most vulnerable populations.

72. (A) Children of school-entry age
Expected years of schooling is an indicator that focuses on children who are currently at the age to enter the school system. It estimates the total

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number of years of education that a child of that age is likely to receive during their lifetime, based on current enrollment patterns. This metric helps assess the future educational potential and current investments in youth.

73. (C) Public goods are defined by non-excludability and non-rivalry
The fundamental difference between public and private goods lies in their consumption characteristics. Public goods are non-excludable, meaning no one can be easily prevented from using them, and non-rival, meaning one person's use doesn't diminish another's. In contrast, private goods are both excludable through price and rival in their consumption, such as a meal or a specific pharmaceutical dose.

74. (A) It encourages a balanced risk pool of both healthy and sick members
Adverse selection destabilizes insurance markets by creating an imbalanced risk pool dominated by high-risk individuals. This phenomenon occurs before a contract is signed because people with known health issues are more motivated to seek insurance than healthy ones. This concentration of risk can lead to rising premiums and, in extreme cases, the total collapse of the insurance market.

75. (A) P-3, Q-2, R-4, S-1
In healthcare economics, different concepts have distinct social and market impacts. Positive externalities often lead to under-production by the free market, while information asymmetry can result in supplier-induced demand. High out-of-pocket expenditure places a significant financial burden on the poor. Conversely, health insurance provides essential financial protection, helping individuals manage the costs of medical care and avoid personal health expenses.

76. (D) Ensuring all citizens obtain health services without financial suffering
Universal Health Coverage is centered on the principle that all people should have access to the health services they need without facing financial ruin. This includes a broad range of services, from prevention to treatment and palliative care. The focus is on two main pillars: the availability of high-quality, essential medical services and the provision of financial protection.

77. (C) Dependence on private providers and low insurance penetration
The high level of out-of-pocket expenditure in India is primarily driven by a heavy reliance on the private healthcare sector and the historically low penetration of health insurance. Many citizens are forced to pay for services directly because public facilities may be overburdened or inaccessible. This lack of financial pooling and insurance coverage makes healthcare costs a major burden for families.

78. (B) Perfect gender equality
In the Gender Inequality Index, a score of zero represents perfect equality between women and men across all measured dimensions. As the value increases toward one, it indicates a greater loss in human development due to gender-based disparities in reproductive health, empowerment, and labor market participation. Therefore, a lower GII value is a sign of a more equitable society.

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79. (A) Standard of Living
Within the Human Development Index, Gross National Income per capita is the specific indicator used to measure the standard of living dimension. This metric reflects the average economic resources available to citizens and their ability to afford essential goods and services. By using GNI at purchasing power parity, the index can fairly compare the economic well-being of different nations.

80. (B) The expected lifespan of a newborn under current mortality trends
Life expectancy at birth is a statistical measure that estimates the average number of years a newborn child is expected to live. This calculation assumes that the prevailing mortality rates at the time of the child's birth will remain constant throughout their entire life. It is a vital indicator of the overall health, nutrition, and safety conditions within a country.

81. (B) Consistent upward trend
Over the last three decades, India has maintained a consistent upward trend in its Human Development Index value. This progress reflects steady improvements in life expectancy, increased access to education, and significant growth in per capita income. While challenges remain,

the overall trajectory shows that the country has made substantial gains in enhancing the basic capabilities and well-being of people.

82. (B) Two
The education dimension of the Human Development Index is measured using a combination of two distinct indicators. These are the mean years of schooling for adults aged twenty-five and older and the expected years of schooling for children of school-entry age. By combining these two metrics, the index captures both the current educational status and future prospects for the generation.

83. (C) A single dollar buys varying amounts of goods in different nations
Purchasing Power Parity is used in the Human Development Index because market exchange rates do not account for the different costs of living across countries. A single US dollar can typically purchase a much larger quantity of basic goods and services in a developing nation than in a wealthy one. PPP adjustments ensure the income component reflects real purchasing power.

84. (C) High Human Development
A country achieving a Human Development Index score between 0.700 and 0.799 is classified as having High Human Development. This tier indicates that the nation has made significant progress in health, education, and income, though it has not yet reached the Very High level. Countries in this category typically have well-established social systems and are working toward further improving citizens' lives.

85. (A) 1 and 2 only
Healthcare is considered a merit good because individuals often fail to fully value its long-term benefits, leading to under-consumption in a free market. Consequently, the government has a responsibility to provide or subsidize these services to ensure social equity and public well-being. Unlike some goods that the market over-provides, merit goods like healthcare are typically supplied in insufficient quantities.

86. (B) Mass immunization against COVID-19
Mass immunization is a classic example of a positive externality in public health. When a large portion of the population is vaccinated, the overall spread of a virus is significantly reduced, which benefits even those who are not vaccinated. This collective protection, or herd immunity, is a major social benefit that goes beyond the individual health gain of the person.

87. (D) Increased service usage by individuals due to insurance coverage
Moral hazard in health insurance occurs when people change their behavior because they are protected from the full cost of medical services. This often leads to increased usage of healthcare, as insured individuals may seek more frequent consultations or expensive tests that they would have avoided if paying out-of-pocket. This phenomenon can drive up the total costs for the system.

88. (A) Common pool resources such as a heavily crowded public clinic
Common pool resources are characterized by being non-excludable but rival. A crowded public clinic is a good example; while it may be difficult to exclude anyone from seeking care, the use of the clinic's limited resources by one patient reduces the quality or speed of care available to others. This rivalry often leads to congestion if not properly managed.

89. (C) Rival and excludable
Private goods in the healthcare sector are both rival and excludable. Rivalry means that a resource, such as a specific medical consultation time or a bottle of medicine, cannot be used by two people at once. Excludability means that providers can prevent those who do not pay the market price from accessing these goods. Most commercial medical products follow this model.

90. (A) Both A and R are true and R is the correct explanation of A.
The Kerala Model of development is defined by its intense focus on the social sector, particularly education and healthcare. This strategy has allowed the state to achieve high literacy rates and long life expectancy, which are often superior to wealthier Indian states. This success proves that prioritized public investment in human capabilities can lead to high human development without rapid industrialization.

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1. Monocular Cue
2. Binocular Cue
3. Monocular Cue
4. Binocular Cue

(A) P-1, Q-2, R-3, S-4
(B) P-2, Q-1, R-4, S-3
(C) P-4, Q-3, R-2, S-1
(D) P-2, Q-3, R-1, S-4

17. Which depth cue relies on the fact that the two eyes receive slightly different images of the same object?
(A) Relative Clarity
(B) Retinal Disparity
(C) Light and Shadow
(D) Linear Perspective

18. In the context of binocular cues, "convergence" refers to:
(A) The inward turning of the eyes to focus on a nearby object.
(B) The overlap of two different colors in the visual field.
(C) The blending of distant objects into the horizon.
(D) The rapid movement of eyes across a printed page.

19. Two statements regarding perceptual constancy are given below. Read both statements and choose the correct option.
Statement I: Size constancy allows us to perceive an object as having the same size even if its distance from us changes.
Statement II: Perceptual constancy is only possible if the retinal image size remains exactly the same.
(A) Statement I is correct, Statement II is incorrect.
(B) Statement I is incorrect, Statement II is correct.
(C) Both statements are correct.
(D) Both statements are incorrect.

20. Which type of constancy ensures that a door is perceived as rectangular even as it swings open and casts a trapezoidal image on the retina?
(A) Color Constancy
(B) Size Constancy
(C) Brightness Constancy
(D) Shape Constancy

21. Identify the INCORRECT pair regarding perceptual constancies:
(A) Color Constancy — Familiar objects retain color under different lighting.
(B) Shape Constancy — A tilted coin is still perceived as a circle.
(C) Size Constancy — Distant mountains look like small pebbles.
(D) Brightness Constancy — White paper looks white in both sun and shade.

22. Which of the following best defines an illusion?
(A) A complete lack of sensory stimulation.
(B) A misinterpretation of a real external sensory stimulus.
(C) A mental image produced without any external stimulus.
(D) A permanent loss of the ability to perceive depth.

23. Consider the following statements regarding depth and illusions:
1. The Muller-Lyer illusion involves misjudging the length of lines with arrowheads.
2. Monocular cues require the use of only one eye.
3. Illusions occur because the brain's usual perceptual strategies are misled.

Which of the above statement(s) is/are correct?
(A) 1 and 2
(B) 2 and 3
(C) 1 and 3
(D) 1, 2, and 3

24. Which factor affecting perception describes a predisposition to perceive things in a certain way based on expectations?
(A) Perceptual Set
(B) Sensory Adaptation
(C) Bottom-up Processing
(D) Visual Cliff

25. An individual who is extremely hungry is more likely to perceive ambiguous blurry images as food. This illustrates the influence of which factor?
(A) Cultural Background
(B) Maturation
(C) Motivation
(D) Retinal Disparity

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observed value and dividing the result by the range between the maximum and minimum goalposts. This standardized approach allows health achievements to be combined.

100. (D) Private Good
In a market for private goods, it is relatively easy for providers to exclude individuals who do not pay the set price. This excludability allows businesses to generate revenue and manage the distribution of resources based on consumer demand and ability to pay. Most pharmaceutical products and individual medical treatments operate as private goods, where the transfer is contingent upon payment.

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(D) The Laboratory Assistant

35. Which term describes a stimulus that initially elicits no specific response but comes to elicit a response after association with a UCS?
(A) Unconditioned Response
(B) Reinforcer
(C) Conditioned Stimulus
(D) Discriminative Stimulus

36. Match the Classical Conditioning terms in List I with their definitions in List II:
List I: (Term)
P. UCS
Q. CS
R. UCR
S. CR
List II: (Definition)
1. Learned response to a neutral stimulus
2. Natural, unlearned reaction to a stimulus
3. Stimulus that naturally triggers a response
4. Originally neutral stimulus that triggers a learned response
(A) P-1, Q-2, R-3, S-4
(B) P-4, Q-3, R-1, S-2
(C) P-3, Q-1, R-4, S-2
(D) P-3, Q-4, R-2, S-1

37. What is the "Acquisition" phase in classical conditioning?
(A) The period when the CR is gradually weakened.
(B) The sudden reappearance of a CR after a rest period.
(C) The initial stage when the CS and UCS are linked.
(D) The process of distinguishing between two similar stimuli.

38. Which process occurs when the Conditioned Stimulus (CS) is repeatedly presented without the Unconditioned Stimulus (UCS)?
(A) Generalization
(B) Extinction
(C) Spontaneous Recovery
(D) Higher-order Conditioning

39. A dog salivates to a bell after conditioning. If the bell is not rung for two days and then rung again, the dog salivates again. This is known as:
(A) Acquisition
(B) Discrimination
(C) Latent Learning
(D) Spontaneous Recovery

40. Identify the correct statement regarding Stimulus Generalization:
(A) The organism responds to stimuli that are similar to the original CS.
(B) The organism responds only to the exact stimulus used in training.
(C) The organism stops responding to all stimuli.
(D) The organism forgets the association between CS and UCS.

41. Two statements regarding conditioning are given below. Read both statements and choose the correct option.
Statement I: Stimulus Discrimination is the ability to differentiate between a conditioned stimulus and other irrelevant stimuli.
Statement II: Discrimination is the opposite process of Generalization.
(A) Statement I is correct, Statement II is incorrect.
(B) Statement I is incorrect, Statement II is correct.
(C) Both statements are correct.
(D) Both statements are incorrect.

42. Which of the following is the most effective timing for the presentation of the CS and UCS in classical conditioning?
(A) CS presented slightly before the UCS.
(B) CS and UCS presented at exactly the same time.
(C) CS presented long after the UCS.
(D) UCS presented and removed before the CS appears.

43. Consider the following statements about Classical Conditioning:
1. The CR is usually physiologically similar to the UCR.
2. Extinction means the learned association is permanently erased from the brain.
3. Spontaneous recovery occurs without any new pairings of CS and UCS.
Which of the above statement(s) is/are correct?
(A) 1 and 2
(B) 2 and 3

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by the observer.

8. Two statements regarding the laws of perception are given below. Read both statements and choose the correct option.
Statement I: The Law of Similarity suggests that objects with similar shape or color are perceived as belonging together.
Statement II: The Law of Proximity suggests that objects far apart are more likely to be grouped than those close together.
(A) Statement I is correct, Statement II is incorrect.
(B) Statement I is incorrect, Statement II is correct.
(C) Both statements are correct.
(D) Both statements are incorrect.

9. Consider the following statements regarding Gestalt Principles:
1. The Law of Closure allows us to perceive complete forms even when lines are interrupted.
2. The Law of Continuity favors smooth, flowing paths over abrupt changes.
3. Pragnanz refers to the tendency to perceive the most complex possible organization.

Which of the above statement(s) is/are correct?
(A) 2 and 3
(B) 1 and 3
(C) 1 and 2
(D) 1, 2, and 3

10. The Gestalt law of Pragnanz is also commonly referred to as the:
(A) Law of Simplicity
(B) Law of Effect
(C) Law of Proximity
(D) Law of Contrast

11. Arrange the following steps of the perceptual process in the correct chronological sequence:
1. Environmental Stimulus
2. Processing in the Brain
3. Transduction by Receptors
4. Perception and Recognition

(A) 1-2-3-4
(B) 1-3-2-4
(C) 3-1-2-4
(D) 1-3-4-2

12. Identify the INCORRECT statement regarding the Law of Closure:
(A) It involves the mental filling of missing parts of a visual stimulus.
(B) It states that we group items that are physically touching each other.
(C) It helps in perceiving a circle even if a small segment is missing.
(D) It is a fundamental principle of Gestalt perceptual organization.

13. The following question consists of two statements — Assertion (A) and Reason (R). Answer the question by selecting the appropriate option.
Assertion (A): Depth perception is essential for humans to navigate a three-dimensional world using two-dimensional retinal images.
Reason (R): The brain utilizes both monocular and binocular cues to calculate the distance of objects.
(A) Both A and R are true and R is the correct explanation of A.
(B) Both A and R are true but R is not the correct explanation of A.
(C) A is true but R is false.
(D) A is false but R is true.

14. Which of the following is a monocular cue for depth perception where parallel lines appear to converge in the distance?
(A) Retinal Disparity
(B) Convergence
(C) Stereopsis
(D) Linear Perspective

15. Which of the following pairs is correctly matched?
(A) Texture Gradient — Monocular cue
(B) Interposition — Binocular cue
(C) Retinal Disparity — Monocular cue
(D) Convergence — Gestalt Law

16. Match the Depth Cues in List I with their category in List II:
List I: (Depth Cue)
P. Retinal Disparity
Q. Relative Size
R. Convergence
S. Interposition
List II: (Category)

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91. (D) MPI
The Multidimensional Poverty Index is designed to measure deprivations in health, education, and living standards at the individual and household levels. While the HDI provides a national average of progress, the MPI identifies specific gaps, such as lack of clean water or inadequate schooling, that poor families face. This allows for a more detailed understanding of poverty beyond income.

92. (B) Mean schooling years and expected schooling years
The Knowledge dimension of the Human Development Index is assessed through two educational metrics. Mean years of schooling provides a measure of the current educational attainment of the adult population. Expected years of schooling estimates the potential duration of education for children currently entering the school system. Together, these indicators reflect the total investment in and access to knowledge across generations.

93. (C) A one-on-one medical consultation with a specialist
A one-on-one consultation with a medical specialist is a private good because it is both rival and excludable. The doctor's time spent with one patient cannot be simultaneously given to another, making it rival. Additionally, the specialist can exclude anyone who does not pay the required consultation fee. This contrasts with public goods, which are available to everyone without depleting resource.

94. (D) Specialized medical training that creates a provider knowledge gap
The fundamental cause of information asymmetry in the medical field is the extensive and specialized training required to become a healthcare provider. This creates a significant knowledge gap between the doctor and the patient. Because patients lack this technical expertise, they must trust providers to make the best decisions, which can lead to vulnerabilities in the relationship and market inefficiencies.

95. (A) P-4, Q-3, R-2, S-1
The UNDP classifies countries into four human development categories based on their HDI scores. Very High development corresponds to scores of 0.800 and above. High development ranges from 0.700 to 0.799, while Medium development spans 0.550 to 0.699. Any score below 0.550 is categorized as Low human development. This standardized classification system allows for global benchmarking and the monitoring of progress.

96. (D) Integrated access to quality services, medicines, and financial protection
Universal Health Coverage is a comprehensive framework that includes several integrated components. It ensures that all people have access to the full range of quality, essential health services they need, including safe and affordable medicines and vaccines. Crucially, UHC also provides financial risk protection, ensuring that the use of these services does not expose the user to significant financial hardship.

97. (B) It triggers catastrophic health costs for impoverished families
Out-of-pocket expenditure is considered a major developmental burden because it can lead to catastrophic financial consequences. For poor families, even a minor medical emergency can consume their entire income or force them into high-interest debt. This lack of financial protection means that health shocks often result in long-term poverty, as households are forced to divert resources away from essentials.

98. (D) Indicators of reproductive health, empowerment, and labor status
The Gender Inequality Index is a composite measure that captures the loss in human development due to gender disparities. It specifically tracks reproductive health through maternal mortality and adolescent birth rates. Empowerment is measured by the share of parliamentary seats and secondary education attainment. Finally, labor market status is assessed through participation rates, providing a multifaceted view of disadvantages.

99. (A) (Actual value - Minimum value) / (Maximum value - Minimum value)
To calculate the health dimension index in the HDI, a normalization formula is used to convert life expectancy data into a value between zero and one. This involves subtracting a predetermined minimum value from the actual

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26. Match the factors influencing perception in List I with their examples in List II:
List I: (Factor)
P. Experience
Q. Motivation
R. Perceptual Set
S. Cultural Context
List II: (Example)
1. A hungry person seeing "bread" in a cloud shape
2. A pilot identifying a plane faster than a civilian
3. Expecting a loud noise after seeing a lightning bolt
4. Recognition of specific symbols unique to a society
(A) P-2, Q-1, R-3, S-4
(B) P-1, Q-2, R-4, S-3
(C) P-3, Q-4, R-1, S-2
(D) P-2, Q-3, R-1, S-4

27. The following question consists of two statements — Assertion (A) and Reason (R). Answer the question by selecting the appropriate option.
Assertion (A): Past experience plays a significant role in how we interpret current sensory data.
Reason (R): Perceptual learning allows individuals to become more sensitive to specific features of stimuli over time.
(A) Both A and R are true and R is the correct explanation of A.
(B) Both A and R are true but R is not the correct explanation of A.
(C) A is true but R is false.
(D) A is false but R is true.

28. Learning is most accurately defined as a:
(A) Temporary change in behavior due to fatigue.
(B) Relatively permanent change in behavior due to experience.
(C) Change in behavior resulting solely from biological growth.
(D) Sudden instinctive response to a new environment.

29. Which of the following is an example of behavior change that does NOT qualify as learning?
(A) A child improving their handwriting through practice.
(B) A dog sitting on command after being given treats.
(C) A teenager's voice deepening due to hormonal changes.
(D) A student memorizing a poem for a class.

30. The distinction between learning and maturation is that maturation is primarily driven by:
(A) Practice and exercise.
(B) Environmental feedback.
(C) Socio-economic status.
(D) Genetic and biological programming.

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31. Two statements regarding development are given below. Read both statements and choose the correct option.
Statement I: Maturation provides the necessary physical basis or readiness for certain types of learning to occur.
Statement II: Learning can occur even in the absence of any biological maturation.
(A) Statement I is correct, Statement II is incorrect.
(B) Statement I is incorrect, Statement II is correct.
(C) Both statements are correct.
(D) Both statements are incorrect.

32. Identify the INCORRECT statement regarding the nature of learning:
(A) Learning involves some form of experience.
(B) Learning outcomes are always immediately visible in performance.
(C) Learning can be both intentional and incidental.
(D) Learning helps organisms adapt to their environment.

33. Which of the following pairs is correctly matched in the context of Classical Conditioning?
(A) Ivan Pavlov — Operant Conditioning
(B) Salivation to Meat — Unconditioned Response
(C) Meat Powder — Conditioned Stimulus
(D) Bell — Unconditioned Stimulus

34. In Pavlov's original experiment, what was the Unconditioned Stimulus (UCS)?
(A) The Food
(B) The Salivation
(C) The Bell

CHAPTER 17
Perception and Learning

1. Which of the following terms refers to the process of organizing and interpreting sensory information to recognize meaningful objects and events?
(A) Sensation
(B) Perception
(C) Transduction
(D) Adaptation

2. In the context of psychological studies, what is the primary distinction between sensation and perception?
(A) Sensation involves raw stimulus input, while perception involves interpretation.
(B) Sensation is psychological, while perception is purely biological.
(C) Sensation occurs in the brain, while perception occurs in the receptors.
(D) Sensation is a conscious process, while perception is unconscious.

3. The following question consists of two statements — Assertion (A) and Reason (R). Answer the question by selecting the appropriate option.
Assertion (A): Perception is considered an active mental process rather than a passive reception of stimuli.
Reason (R): The brain integrates current sensory input with past experiences and expectations to create meaning.
(A) Both A and R are true and R is the correct explanation of A.
(B) Both A and R are true but R is not the correct explanation of A.
(C) A is true but R is false.
(D) A is false but R is true.

4. Which statement accurately describes the nature of perceptual organization?
(A) It is a random process of collecting unrelated sensory data.
(B) It is entirely independent of the physiological structure of the eye.
(C) It only occurs when a person intentionally focuses on an object.
(D) It follows specific laws to group stimuli into coherent forms.

5. Which Gestalt principle explains the tendency to perceive sensory objects as a distinct form against a background?
(A) Law of Similarity
(B) Law of Proximity
(C) Figure and Ground
(D) Law of Closure

6. Match the Gestalt Law in List I with its description in List II:
List I: (Gestalt Law)
P. Proximity
Q. Similarity
R. Continuity
S. Closure
List II: (Description)
1. Tendency to perceive smooth, continuous patterns
2. Objects close to each other are perceived as a group
3. Tendency to fill in gaps to create a whole object
4. Items that look alike are grouped together
(A) P-4, Q-2, R-3, S-1
(B) P-2, Q-4, R-1, S-3
(C) P-2, Q-1, R-4, S-3
(D) P-3, Q-4, R-2, S-1

7. Which of the following is NOT a characteristic of Gestalt laws of grouping?
(A) They help in making sense of chaotic stimuli.
(B) They are generally considered to be innate tendencies.
(C) They prioritize the "whole" over the sum of individual parts.
(D) They require formal education to be applied

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(C) 1, 2, and 3
(D) 1 and 3

44. Thorndike's "Trial and Error" learning was primarily studied using which apparatus?
(A) Skinner Box
(B) Puzzle Box
(C) T-Maze
(D) Visual Cliff

45. Which law of Thorndike states that behaviors followed by favorable consequences become more likely?
(A) Law of Exercise
(B) Law of Readiness
(C) Law of Effect
(D) Law of Recency

46. According to the Law of Exercise, the strength of an S-R connection is increased by:
(A) Punishment
(B) Motivation
(C) Biological maturation
(D) Practice and repetition

47. The following question consists of two statements — Assertion (A) and Reason (R). Answer the question by selecting the appropriate option.
Assertion (A): Thorndike believed that learning involves the gradual strengthening of connections between stimuli and responses.
Reason (R): His Law of Effect suggests that unsatisfying outcomes weaken the bond between the situation and the act.
(A) Both A and R are true and R is the correct explanation of A.
(B) Both A and R are true but R is not the correct explanation of A.
(C) A is true but R is false.
(D) A is false but R is true.

48. Instrumental conditioning is another name for:
(A) Classical Conditioning
(B) Operant Conditioning
(C) Observational Learning
(D) Insight Learning

49. In Thorndike's Puzzle Box experiment, the cat's reduction in time to escape over successive trials illustrates:
(A) Instant Insight
(B) Incremental Learning
(C) Classical Association
(D) Observational Imitation

50. Match the psychologists in List I with their primary theories/experiments in List II:
List I: (Psychologist)
P. Pavlov
Q. Thorndike
R. Skinner
S. Gestaltists
List II: (Theory/Experiment)
1. Operant Conditioning
2. Classical Conditioning
3. Laws of Perceptual Organization
4. Law of Effect
(A) P-2, Q-4, R-1, S-3
(B) P-1, Q-2, R-3, S-4
(C) P-2, Q-1, R-4, S-3
(D) P-4, Q-3, R-2, S-1

51. Two statements regarding conditioning models are given below. Read both statements and choose the correct option.
Statement I: In Operant Conditioning, the organism's behavior is voluntary.
Statement II: In Classical Conditioning, the organism's behavior is typically an involuntary reflex.
(A) Statement I is correct, Statement II is incorrect.
(B) Statement I is incorrect, Statement II is correct.
(C) Both statements are correct.
(D) Both statements are incorrect.

52. B.F. Skinner is famously associated with which experimental tool?
(A) The Pavlovian Harness
(B) The Bobo Doll
(C) The Ames Room
(D) The Skinner Box

53. Which of the following defines "Positive Reinforcement"?
(A) Removing an unpleasant stimulus to increase a behavior.
(B) Presenting an unpleasant stimulus to decrease a behavior.
(C) Presenting a pleasant stimulus to increase a

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2. Fixed Ratio
3. Continuous Reinforcement

(A) 1-2-3
(B) 3-2-1
(C) 2-1-3
(D) 1-3-2

75. Which term describes the biological growth processes that enable orderly changes in behavior?
(A) Learning
(B) Perception
(C) Conditioning
(D) Maturation

76. If you see a circle with several small gaps in its circumference but still perceive it as a whole circle, you are using:
(A) Law of Similarity
(B) Law of Closure
(C) Law of Proximity
(D) Law of Continuity

77. In classical conditioning, the neutral stimulus becomes the _____ after being paired with the UCS.
(A) Unconditioned Response
(B) Conditioned Response
(C) Conditioned Stimulus
(D) Reinforcer

78. Thorndike's work acted as a foundation for which later psychological perspective?
(A) Humanism
(B) Functionalism
(C) Structuralism
(D) Behaviorism

79. Two statements regarding illusions are given below. Read both statements and choose the correct option.
Statement I: Illusions are essentially errors in perception.
Statement II: Illusions prove that the human perceptual system is completely unreliable.
(A) Statement I is correct, Statement II is incorrect.
(B) Statement I is incorrect, Statement II is correct.
(C) Both statements are correct.
(D) Both statements are incorrect.

80. Which of the following is an example of negative punishment?
(A) Physically spanking a young child for telling a lie.
(B) Grounding a teenager to restrict freedom after a failure.
(C) Assigning a student extra difficult homework after class.
(D) Turning off a loud, annoying alarm once a task is done.

81. Which depth cue is being used when the surface of a receding object appears to become denser and the fine details become less distinct?
(A) Relative Size
(B) Texture Gradient
(C) Retinal Disparity
(D) Convergence

82. The term "Pragnanz" is best translated as:
(A) Good form
(B) Completeness
(C) Meaningfulness
(D) Complexity

83. Consider the following statements about Operant Conditioning:
1. Positive reinforcement increases behavior by adding something pleasant.
2. Negative reinforcement increases behavior by removing something unpleasant.
3. Punishment always increases the frequency of a behavior.

Which of the above statement(s) is/are correct?
(A) 2 and 3
(B) 1 and 3
(C) 1 and 2
(D) 1, 2, and 3

84. Identify the INCORRECT statement regarding Sensation:
(A) It is the first stage in the biochemical processing of stimuli.
(B) It involves the detection of physical energy by sense organs.
(C) It is common across most individuals of a species.
(D) It provides meaning and interpretation to the stimuli.

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ten cars sold.
(B) Checking for text messages that arrive at random times.
(C) Getting a monthly salary on the 30th day of every month.
(D) A child getting a candy every time they clean their room up.

65. Identify the INCORRECT statement regarding Thorndike's Law of Exercise:
(A) It consists of the Law of Use and the Law of Disuse.
(B) It states that rewards are the only way to strengthen behavior.
(C) It suggests that practice leads to better learning.
(D) It was later modified because practice alone doesn't always guarantee learning.

66. What is the main difference between Classical and Operant Conditioning?
(A) Classical involves involuntary reflexes, Operant involves voluntary actions.
(B) Classical involves consequences, Operant involves antecedents.
(C) Classical was proposed by Skinner, Operant by Pavlov.
(D) Classical requires a box, Operant requires a bell.

67. The following question consists of two statements — Assertion (A) and Reason (R). Answer the question by selecting the appropriate option.
Assertion (A): Variable Ratio schedules result in high and steady rates of responding.
Reason (R): The organism cannot predict which specific response will lead to reinforcement.
(A) Both A and R are true and R is the correct explanation of A.
(B) Both A and R are true but R is not the correct explanation of A.
(C) A is true but R is false.
(D) A is false but R is true.

68. The "post-reinforcement pause" is most characteristically observed in which schedule?
(A) Variable Ratio
(B) Variable Interval
(C) Continuous Reinforcement
(D) Fixed Interval

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69. Which Gestalt principle suggests that we perceive lines as following the smoothest path?
(A) Similarity
(B) Proximity
(C) Continuity
(D) Closure

70. Match the learning concepts in List I with their key features in List II:
List I: (Concept)
P. Acquisition
Q. Extinction
R. Generalization
S. Discrimination
List II: (Key Feature)
1. Decrease in CR when UCS is absent
2. Responding to different but similar stimuli
3. Initial learning of the stimulus-response link
4. Responding only to a specific stimulus
(A) P-1, Q-3, R-4, S-2
(B) P-3, Q-1, R-2, S-4
(C) P-4, Q-2, R-1, S-3
(D) P-3, Q-4, R-2, S-1

71. When a child learns that a "square" is different from a "rectangle," which learning process is occurring?
(A) Generalization
(B) Extinction
(C) Spontaneous Recovery
(D) Discrimination

72. Which of the following is NOT a monocular depth cue?
(A) Retinal Disparity
(B) Interposition
(C) Relative Size
(D) Texture Gradient

73. The concept of "Figure and Ground" was first introduced by:
(A) Behavioral Psychologists
(B) Cognitive Psychologists
(C) Gestalt Psychologists
(D) Psychoanalysts

74. Arrange the following schedules of reinforcement from highest to lowest resistance to extinction:
1. Variable Ratio

28. (B) Relatively permanent change in behavior due to experience.
Learning is defined as a relatively permanent change in behavior or mental associations that results from experience. This definition excludes temporary changes caused by factors like fatigue or drugs, as well as changes driven purely by biological maturation. By acquiring new information or skills through interaction with the environment, organisms adapt their future responses to similar situations.

29. (C) A teenager's voice deepening due to hormonal changes.
While learning involves changes based on experience or practice, some behavioral changes result from biological processes. A teenager's voice deepening is a product of maturation and hormonal shifts rather than environmental interaction. In contrast, improving handwriting, responding to commands, and memorizing poems all require practice and experience, making them clear examples of the learning process in action.

30. (D) Genetic and biological programming.
Maturation refers to the orderly sequence of biological growth and developmental changes that are relatively independent of experience. It is primarily driven by genetic instructions and physiological programming. While learning requires environmental interaction and practice, maturation provides the necessary physical readiness, such as muscular control, that must occur before specific types of learning can effectively take place.

31. (A) Statement I is correct, Statement II is incorrect.
Maturation establishes the biological foundation necessary for an organism to engage in certain learning activities. For instance, a child cannot learn to walk until their muscles and nervous system have matured sufficiently. Therefore, learning is often dependent on biological development, making the claim that learning can occur entirely without any maturation processes factually inaccurate.

32. (B) Learning outcomes are always immediately visible in performance.
A critical distinction exists between learning, which is an internal change, and performance, which is the outward expression of that learning. Learning may occur without being immediately evident in behavior; this is known as latent learning. While learning involves experience and aids adaptation, it is not always instantly observable, as motivation or environmental factors might delay its expression.

33. (B) Salivation to Meat — Unconditioned Response.
In classical conditioning, the unconditioned response is an innate, natural reaction to a stimulus. Salivating when meat is presented is a biological reflex that does not require prior learning. In contrast, the bell is the conditioned stimulus, the meat is the unconditioned stimulus, and Ivan Pavlov is the researcher most famously associated with this specific type of learning.

34. (A) The Food
The unconditioned stimulus is any stimulus that naturally and automatically triggers a specific response without prior conditioning. In Ivan Pavlov's classic experiments with dogs, the meat powder or food served as the unconditioned stimulus because it instinctively caused the dogs to salivate. This natural association provides the biological foundation upon which conditioned learning is built during the acquisition phase.

35. (C) Conditioned Stimulus
A conditioned stimulus starts as a neutral stimulus that does not initially produce the target response. Through repeated pairings with an unconditioned stimulus, it eventually triggers a learned response on its own. This process demonstrates how an organism learns to associate a previously meaningless signal with a biologically significant event, resulting in a new, acquired behavioral reaction.

36. (D) P-3, Q-4, R-2, S-1
Classical conditioning involves several key components. The unconditioned stimulus naturally triggers a response, while the unconditioned response is that natural reaction. A conditioned stimulus is a neutral signal that becomes meaningful through association.

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85. A slot machine in a casino is an example of which reinforcement schedule?
(A) Fixed Ratio
(B) Fixed Interval
(C) Variable Ratio
(D) Variable Interval

86. Which of the following is a binocular cue for depth?
(A) Linear Perspective
(B) Convergence
(C) Light and Shadow
(D) Relative Height

87. In the Muller-Lyer illusion, lines of equal length appear different because of:
(A) Using a variety of contrasting colors.
(B) Variation in the thickness of the lines.
(C) The presence of binocular retinal disparity.
(D) The direction of arrowheads at the ends.

88. Which factor in perception refers to the influence of one's cultural background on how they see the world?
(A) Experience
(B) Motivation
(C) Perceptual Set
(D) Sensation

89. Two statements regarding extinction are given below. Read both statements and choose the correct option.
Statement I: Extinction in operant conditioning occurs when reinforcement is stopped.
Statement II: Extinction in classical conditioning occurs when the UCS is no longer paired with the CS.
(A) Statement I is correct, Statement II is incorrect.
(B) Statement I is incorrect, Statement II is correct.
(C) Both statements are correct.
(D) Both statements are incorrect.

90. The "Law of Effect" was formulated by:
(A) Edward Thorndike
(B) Ivan Pavlov
(C) B.F. Skinner
(D) Wolfgang Kohler

91. Which of the following is an example of "Similarity" in Gestalt grouping?
(A) Seeing a set of dots placed close together as a single square.
(B) Filling in the gaps of a dashed line to perceive a smooth curve.
(C) Seeing a clearly defined figure against a blurry background.
(D) Grouping players in a field based on the color of their uniforms.

92. Perceptual constancy is primarily a:
(A) Failure of the sensory organs.
(B) Top-down process of the brain.
(C) Bottom-up process of the receptors.
(D) Result of retinal fatigue.

93. Which of the following is NOT one of the primary types of perceptual constancy?
(A) Size Constancy
(B) Shape Constancy
(C) Distance Constancy
(D) Color Constancy

94. The process by which we learn to respond to certain stimuli and not others is called:
(A) Generalization
(B) Acquisition
(C) Extinction
(D) Discrimination

95. Match the following terms in List I with the psychologist in List II:
List I: (Term)
P. Instrumental Conditioning
Q. Classical Conditioning
R. Operant Conditioning
S. Gestalt Laws
List II: (Psychologist)
1. Pavlov
2. Skinner
3. Wertheimer/Koffka
4. Thorndike
(A) P-4, Q-1, R-2, S-3
(B) P-1, Q-2, R-3, S-4
(C) P-2, Q-3, R-1, S-4
(D) P-3, Q-4, R-2, S-1

96. "Learning through consequences" is a central theme of:
(A) Classical Conditioning

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9. (C) 1 and 2
The law of closure explains how the brain completes fragmented shapes to perceive a whole form. Similarly, the law of continuity suggests that the mind prefers following smooth, uninterrupted paths. In contrast, the principle of Pragnanz states that individuals perceive stimuli in the simplest possible organization, rather than seeking out the most complex interpretation.

10. (A) Law of Simplicity
The law of Pragnanz is frequently referred to as the law of simplicity because it describes the brain's tendency to organize visual input into the simplest possible form. This principle ensures that the mind processes complex images by reducing them to basic, symmetrical, and stable structures, which facilitates faster and more efficient environmental recognition.

11. (B) 1-3-2-4
The perceptual process begins with an environmental stimulus that triggers sensory receptors. These receptors perform transduction, converting physical energy into neural signals. These signals are then processed within the brain, where they are interpreted. Finally, the individual achieves conscious perception and recognition, completing the transition from raw environmental data to meaningful mental experience.

12. (B) It states that we group items that are physically touching each other.
The law of closure specifically describes the mental process of filling in gaps within a stimulus to perceive a complete, unified figure. It does not require objects to be physically touching; instead, it relies on the brain's ability to bridge interruptions. This principle allows for the recognition of familiar shapes even when parts of them are obscured.

13. (A) Both A and R are true and R is the correct explanation of A.
Depth perception is crucial for interacting with a three-dimensional world because retinal images are inherently two-dimensional. To overcome this limitation, the brain interprets various signals to judge distance and volume. By integrating monocular cues available to one eye and binocular cues requiring both eyes, the mind constructs an accurate spatial representation of the surrounding environment.

14. (D) Linear Perspective
Linear perspective is a powerful monocular cue used by the brain to judge distance. It occurs when two parallel lines appear to converge at a single point on the horizon as they recede into the distance. This visual phenomenon provides a sense of depth and three-dimensionality on flat surfaces, making it essential for artistic and spatial perception.

15. (A) Texture Gradient — Monocular cue
Texture gradient is a monocular cue where the surface of an object appears more detailed and coarser when close, but becomes denser and finer as it recedes. This provides significant information about depth using only one eye. Other cues like retinal disparity and convergence are binocular, requiring the coordination of both eyes to function effectively.

16. (B) P-2, Q-1, R-4, S-3
Depth cues are categorized based on whether they require one eye or both. Retinal disparity and convergence are binocular cues, relying on the differences between the two eyes' views and their physical movement. Conversely, relative size and interposition are monocular cues, allowing the brain to perceive distance and depth even when viewing with only a single eye.

17. (B) Retinal Disparity
Retinal disparity is a binocular depth cue resulting from the horizontal separation of the eyes. Each eye captures a slightly different perspective of the same object. The brain compares these two disparate images to calculate the precise distance of the object. This process is fundamental for creating a vivid, three-dimensional experience of the immediate environment.

18. (A) The inward turning of the eyes to focus on a nearby object.
Convergence is a binocular depth cue involving the physical movement of the eyes. As an object moves closer to a person, the eyes must turn inward toward each other to maintain focus. The brain monitors the tension in the eye muscles responsible for this inward rotation and uses that feedback to estimate the object's proximity.

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ANSWERS

1. (B) Perception
Perception represents the psychological process through which the brain organizes and interprets sensory input. While sensation involves the simple detection of stimuli, perception adds meaning by identifying objects and events. This mental activity enables individuals to navigate the environment by transforming raw physiological signals into a coherent, recognizable understanding of reality.

2. (A) Sensation involves raw stimulus input, while perception involves interpretation.
Sensation acts as the primary physiological stage where sensory receptors detect environmental energy. In contrast, perception serves as the subsequent psychological stage involving the active interpretation and organization of those signals. This fundamental distinction highlights how raw biological data transforms into meaningful experiences, allowing humans to recognize and react to the world around them.

3. (A) Both A and R are true and R is the correct explanation of A.
Perception functions as an active mental process because the human brain does more than just record incoming signals. It actively integrates current sensory data with stored memories, expectations, and personal knowledge. This constructive process generates internal meaning from external stimuli, explaining why perception is often subjective rather than a direct copy of the environment.

4. (D) It follows specific laws to group stimuli into coherent forms.
Perceptual organization refers to the innate tendency of the human mind to structure individual sensory elements into meaningful wholes. This process is governed by specific psychological principles, primarily identified by Gestalt theorists. These laws ensure that the visual field is perceived as a collection of organized objects rather than a chaotic array of random dots.

5. (C) Figure and Ground
The figure-ground relationship is a fundamental principle of perceptual organization that allows individuals to distinguish a prominent object from its surrounding environment. The central object of focus is identified as the figure, while the remaining area becomes the background. This automatic separation is essential for recognizing objects and navigating through complex visual scenes effectively.

6. (B) P-2, Q-4, R-1, S-3
Gestalt principles define how the human brain organizes sensory information. Proximity suggests that items located near each other are viewed as a unit. Similarity implies that things looking alike are grouped together. Continuity describes the preference for smooth patterns. Closure involves filling in gaps to perceive a complete object, demonstrating how the mind creates order.

7. (D) They require formal education to be applied by the observer.
Gestalt laws of grouping are generally considered innate psychological tendencies that function automatically without the need for formal training or education. These principles prioritize the perception of a global whole over individual parts. They provide a structural framework for organizing chaotic sensory input into coherent, meaningful patterns, aiding in quick environmental interpretation.

8. (A) Statement I is correct, Statement II is incorrect.
The law of similarity correctly posits that elements sharing common features like color or shape are naturally grouped together. However, the law of proximity states that objects located close to one another are perceived as a group. Consequently, the suggestion that distant objects are more likely to be grouped is factually incorrect within perceptual psychology.

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behavior.
(D) Removing a pleasant stimulus to decrease a behavior.

54. An individual takes an aspirin to get rid of a headache. The next time they have a headache, they take an aspirin again. This is an example of:
(A) Positive Reinforcement
(B) Negative Reinforcement
(C) Positive Punishment
(D) Negative Punishment

55. Which of the following is the primary goal of "Punishment" in operant conditioning?
(A) To increase the frequency of a desired behavior.
(B) To provide a reward for correct responses.
(C) To strengthen the S-R bond through practice.
(D) To decrease the frequency of an undesired behavior.

56. Identify the INCORRECT pair regarding reinforcement:
(A) Positive Punishment — Giving a gold star
(B) Positive Reinforcement — Adding a treat
(C) Negative Reinforcement — Stopping a loud noise
(D) Negative Punishment — Taking away a toy

57. A reinforcement schedule where a response is reinforced after a specific, unchanging number of responses is called:
(A) Variable Ratio
(B) Fixed Interval
(C) Fixed Ratio
(D) Variable Interval

58. Which reinforcement schedule is most resistant to extinction?
(A) Variable Ratio
(B) Fixed Interval
(C) Fixed Ratio
(D) Continuous Reinforcement

59. A worker receives a paycheck every Friday regardless of how many items they produce. This is an example of:
(A) Fixed Ratio
(B) Variable Ratio
(C) Variable Interval
(D) Fixed Interval

60. Which schedule of reinforcement involves providing a reward after an unpredictable amount of time has passed?
(A) Fixed Ratio
(B) Variable Interval
(C) Fixed Interval
(D) Variable Ratio

61. Two statements regarding behavioral consequences are given below. Read both statements and choose the correct option.
Statement I: Negative reinforcement and Punishment are the same thing because they both involve unpleasant stimuli.
Statement II: Reinforcement always aims to increase behavior, while punishment aims to decrease it.
(A) Statement I is correct, Statement II is incorrect.
(B) Statement I is incorrect, Statement II is correct.
(C) Both statements are correct.
(D) Both statements are incorrect.

62. In a Variable Ratio schedule, the reinforcement is provided:
(A) After the first response following a set time period.
(B) Every time the behavior occurs.
(C) Only for the first behavior of the day.
(D) After an average number of responses.

63. Consider the following statements regarding Reinforcement Schedules:
1. Fixed schedules produce predictable patterns of response.
2. Ratio schedules are based on the number of behaviors performed.
3. Interval schedules are based on the passage of time.

Which of the above statement(s) is/are correct?
(A) 1, 2, and 3
(B) 1 and 2
(C) 2 and 3
(D) 1 and 3

64. Which of the following is an example of a Variable Interval schedule?
(A) Receiving a fixed financial bonus for every

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19. (A) Statement I is correct, Statement II is incorrect.
Size constancy allows an individual to perceive an object as maintaining its actual size despite changes in the size of the retinal image as distance varies. Perceptual constancy is not dependent on a static retinal image; rather, it is the brain's ability to maintain a stable perception even when the physical sensory input changes significantly.

20. (D) Shape Constancy
Shape constancy is the perceptual ability to recognize an object as having a stable form even when viewed from different angles. For instance, as a rectangular door swings open, the image it projects onto the retina changes into a trapezoid. Despite this distortion, the brain correctly interprets the object's true shape as remaining constant and rectangular.

21. (C) Size Constancy — Distant mountains look like small pebbles.
Size constancy is characterized by perceiving objects as their true size regardless of distance. If distant mountains were perceived as tiny pebbles, it would indicate a failure of size constancy. Normally, the brain compensates for the smaller retinal image by using depth cues to ensure the mountain's massive scale is correctly understood by the observer.

22. (B) A misinterpretation of a real external sensory stimulus.
An illusion occurs when the brain incorrectly interprets actual sensory information from the environment. Unlike hallucinations, which happen without any external input, illusions involve a real stimulus that is distorted by the mind's perceptual processes. These errors reveal the specific heuristics and strategies the brain uses to organize and make sense of complex sensory data.

23. (D) 1, 2, and 3
Illusions like the Muller-Lyer demonstrate how the brain can be misled by environmental cues, such as arrowheads affecting line length judgment. Monocular cues are those that function with just one eye. Together, these concepts illustrate that perception is a complex process where the brain applies specific rules that, while usually helpful, can sometimes lead to systematic errors.

24. (A) Perceptual Set
A perceptual set is a mental predisposition or readiness to perceive something in a particular way based on expectations, context, or past experience. This psychological factor influences how sensory information is interpreted, often causing individuals to overlook certain details or emphasize others. It demonstrates how top-down processing can significantly shape an individual's conscious experience of the world.

25. (C) Motivation
Motivation serves as a powerful internal factor that influences the perceptual process. When an individual experiences a strong physiological need, such as hunger, their brain becomes more sensitive to stimuli related to that need. Consequently, they are more likely to interpret ambiguous or blurry images as food, showing how personal desires can bias the interpretation of sensory data.

26. (A) P-2, Q-1, R-3, S-4
Various factors shape how people perceive their surroundings. Experience allows experts, like pilots, to identify objects faster. Motivation, such as hunger, biases interpretation toward needs. A perceptual set creates specific expectations, like hearing a loud sound after lightning. Finally, cultural context provides the symbolic framework necessary for recognizing and understanding the unique visual signs of a specific society.

27. (A) Both A and R are true and R is the correct explanation of A.
Past experience is fundamental to perception because the brain uses stored knowledge to make sense of new stimuli. Through perceptual learning, individuals refine their ability to distinguish between subtle features of the environment. This increased sensitivity, gained through repeated exposure and practice, directly improves how the brain interprets sensory data, confirming the link between experience and current perception.

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(B) Operant Conditioning
(C) Gestalt Psychology
(D) Structuralism

97. Which of the following best describes the "Conditioned Response"?
(A) An innate reflex to a stimulus.
(B) A learned reaction to a previously neutral stimulus.
(C) A behavior that is reinforced by a reward.
(D) A biological change due to maturation.

98. The tendency to group elements that are moving in the same direction is sometimes considered part of the Law of:
(A) Common Fate
(B) Similarity
(C) Proximity
(D) Closure

99. Which of the following is a core characteristic of "Learning"?
(A) It is always a permanent change.
(B) It occurs only in humans.
(C) It is relatively permanent.
(D) It is independent of experience.

100. Two statements regarding the relationship between sensation and perception are given below. Read both statements and choose the correct option.
Statement I: Perception is the meaningful interpretation of sensation.
Statement II: Without sensation, perception cannot occur in a normal individual.
(A) Statement I is correct, Statement II is incorrect.
(B) Statement I is incorrect, Statement II is correct.
(C) Both statements are correct.
(D) Both statements are incorrect.

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Finally, the conditioned response is the learned reaction to that conditioned stimulus. Together, these elements describe the process of associative learning through stimulus-response pairings.

37. (C) The initial stage when the CS and UCS are linked.
Acquisition is the primary phase of classical conditioning where the association between a neutral stimulus and an unconditioned stimulus is established. During this period, the organism begins to respond to the neutral stimulus as it predicts the arrival of the unconditioned stimulus. The timing and frequency of these pairings are critical for the successful development of a strong conditioned response.

38. (B) Extinction
Extinction occurs in classical conditioning when the conditioned stimulus is presented repeatedly without the accompanying unconditioned stimulus. Over time, the learned association weakens because the signal no longer reliably predicts the significant event. As a result, the conditioned response gradually diminishes and eventually disappears, although the underlying association may still persist in a dormant state within the brain.

39. (D) Spontaneous Recovery
Spontaneous recovery refers to the sudden reappearance of a previously extinguished conditioned response after a period of rest. This phenomenon demonstrates that extinction does not entirely erase the learned association from the mind. Instead, the response is merely suppressed. When the conditioned stimulus is presented again after a delay, the organism may show a weakened version of the original learned behavior.

40. (A) The organism responds to stimuli that are similar to the original CS.
Stimulus generalization is the tendency for an organism to produce a conditioned response to stimuli that are similar, but not identical, to the original conditioned stimulus. For example, if a dog is conditioned to salivate to a specific bell tone, it may also salivate to tones that have a similar pitch, showing how learning extends to related environmental cues.

41. (C) Both statements are correct.
Stimulus discrimination is the learned ability to distinguish between a conditioned stimulus and other stimuli that do not signal an unconditioned stimulus. This process is essentially the opposite of generalization. While generalization involves responding to similarities, discrimination involves responding to differences, ensuring that the organism reacts only to the specific signals that are relevant to its survival or reinforcement.

42. (A) CS presented slightly before the UCS.
The effectiveness of classical conditioning depends heavily on the temporal relationship between stimuli. The most efficient learning occurs during delayed conditioning, where the conditioned stimulus is presented just before the unconditioned stimulus and remains present until the response begins. This sequence allows the conditioned stimulus to serve as a reliable predictor, which is essential for the organism to form a strong association.

43. (D) 1 and 3
In classical conditioning, the conditioned response is typically a physiological variation of the unconditioned response. Furthermore, spontaneous recovery can occur without additional pairings, proving the original association was not destroyed. However, extinction does not mean the memory is erased; rather, it indicates that the response is suppressed. Therefore, the idea that extinction involves permanent erasure of the link is incorrect.

44. (B) Puzzle Box
Edward Thorndike conducted his famous research on trial-and-error learning using a device known as the puzzle box. He placed hungry cats inside the box, requiring them to perform a specific action, like pulling a string, to escape and reach food. By measuring the time taken to escape across multiple trials, Thorndike demonstrated how successful behaviors are gradually strengthened.

45. (C) Law of Effect
The Law of Effect, formulated by Edward Thorndike, states that responses followed by satisfying consequences become more likely to recur in that situation. Conversely, responses followed by discomfort or unsatisfying outcomes

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dependent on an individual's interaction with their environment.

100. (C) Both statements are correct.
Perception is the psychological process of assigning meaning to sensory data, making the first statement correct. Additionally, for a healthy individual, perception relies on the raw input provided by the sense organs through sensation. Without the initial detection of environmental energy, the brain would have no data to interpret, confirming that sensation is a necessary precursor to the perceptual experience.

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headache. Because the action successfully ended a painful state, the person is more likely to repeat the behavior in the future, demonstrating how escaping discomfort acts as a powerful motivator.

55. (D) To decrease the frequency of an undesired behavior.
In the context of operant conditioning, punishment is defined by its effect on behavior rather than its perceived severity. The primary goal of any punishment procedure is to reduce the likelihood that an unwanted behavior will be repeated. By introducing an unpleasant consequence or removing a pleasant one, the association between the behavior and the negative outcome discourages the organism.

56. (A) Positive Punishment — Giving a gold star.
Giving a gold star is an example of positive reinforcement because it adds a pleasant stimulus to increase a desired behavior. Positive punishment, conversely, involves adding an unpleasant stimulus to decrease a behavior. Other pairings, such as negative reinforcement removing noise and negative punishment taking away toys, correctly describe the relationship between stimuli and their intended effects on behavioral frequency.

57. (C) Fixed Ratio
A fixed ratio schedule provides reinforcement after a set, unchanging number of correct responses. This schedule typically results in high rates of responding, as the organism learns that more effort directly leads to more rewards. Often, a brief pause occurs immediately after the reinforcement is delivered, after which the high rate of behavioral output resumes to reach the next requirement.

58. (A) Variable Ratio
The variable ratio schedule is highly resistant to extinction because the reinforcement is delivered after an unpredictable number of responses. Since the organism never knows which specific action will be rewarded, it continues to perform the behavior for a long time even after reinforcements stop. This schedule produces the highest and most consistent rates of responding among all reinforcement types.

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59. (D) Fixed Interval
A fixed interval schedule reinforces the first response made after a specific, predetermined amount of time has elapsed. Receiving a paycheck every Friday is a classic example because the reward is based on the passage of time rather than the volume of work produced. This schedule often produces a "scalloped" response pattern, where activity increases as the time for reinforcement nears.

60. (B) Variable Interval
A variable interval schedule provides reinforcement for the first response after an unpredictable and varying amount of time has passed. Because the organism cannot anticipate exactly when the reward will become available, this schedule tends to produce a slow but steady and consistent rate of responding. It is effective for maintaining behavior over long periods without the need for constant monitoring.

61. (B) Statement I is incorrect, Statement II is correct.
Negative reinforcement and punishment are fundamentally different processes. Reinforcement, whether positive or negative, always aims to increase the frequency of a behavior. Punishment, however, always aims to decrease it. While both may involve unpleasant stimuli, negative reinforcement removes the stimulus to encourage behavior, whereas punishment uses it to discourage behavior, making the first statement factually false.

62. (D) After an average number of responses.
In a variable ratio schedule, reinforcement is delivered after a number of responses that changes from one reward to the next. The schedule is defined by the average number of responses required. This unpredictability prevents the organism from anticipating the reward, leading to a high, steady rate of activity that is extremely difficult to stop once the reinforcement is withdrawn.

63. (A) 1, 2, and 3
All three statements accurately describe the properties of reinforcement schedules. Fixed schedules create predictable behavior patterns, such as the post-reinforcement pause. Ratio schedules depend on the quantity of work or

The brain interprets this gradual shift in texture density as a reliable signal of increasing distance.

82. (A) Good form
The German word "Pragnanz" is best translated as "good form" or "pithiness." Within Gestalt psychology, this principle suggests that individuals perceive complex visual information in the simplest, most stable, and most meaningful way possible. By favoring simple and symmetrical interpretations over complicated ones, the brain reduces the cognitive load required to organize and understand the surrounding sensory environment efficiently.

83. (C) 1 and 2
Positive reinforcement increases behavior by adding a reward, while negative reinforcement increases behavior by removing a painful stimulus. Both processes serve to strengthen the target response. However, punishment is designed to decrease the frequency of a behavior, not increase it. Therefore, the statement claiming that punishment always increases behavior is factually incorrect within the established principles of operant conditioning.

84. (D) It provides meaning and interpretation to the stimuli.
Sensation is the initial process of detecting physical energy and converting it into neural signals, which is generally consistent across members of a species. However, it does not provide meaning or interpretation; that is the function of perception. Sensation is limited to the raw biological recording of data, whereas perception involves the higher-order psychological processing required to understand that data.

85. (C) Variable Ratio
Slot machines operate on a variable ratio schedule because they provide a payout after an unpredictable number of pulls. Since the gambler never knows which specific pull will lead to a win, they are encouraged to play rapidly and persistently. This schedule is notoriously effective at maintaining behavior because the next reward always feels like it could be just one action away.

86. (B) Convergence
Convergence is a binocular depth cue because it relies on the physical movement and coordination of both eyes. As an object approaches, the eyes must turn inward to stay focused on it. The other options, including linear perspective, light and shadow, and relative height, are all monocular cues that can be perceived with only one eye and are commonly used in art.

87. (D) The direction of arrowheads at the ends.
In the Muller-Lyer illusion, two lines of identical length appear different because of the arrowheads attached to their ends. Lines with inward-pointing fins are often perceived as shorter, while those with outward-pointing fins appear longer. This distortion is frequently explained by the brain's tendency to interpret these shapes as three-dimensional corners, which influences the judgment of their relative sizes.

88. (A) Experience
The influence of cultural background on perception is categorized under the factor of experience. People from different cultures may interpret the same sensory information differently based on the unique environmental and social experiences they have encountered throughout their lives. This demonstrates how perception is not just a biological process but is also shaped by the specific learning history and context of the individual.

89. (C) Both statements are correct.
Extinction is a process that occurs in both major types of conditioning when the maintaining variables are removed. In operant conditioning, behavior stops when reinforcement is no longer provided. In classical conditioning, the learned response fades when the conditioned stimulus is repeatedly presented without the unconditioned stimulus. Both statements accurately describe the conditions necessary for the weakening of a learned association.

90. (A) Edward Thorndike
The Law of Effect was formulated by Edward Thorndike through his observations of animals in puzzle boxes. This principle established that the consequences of an action determine whether that action will be repeated. Thorndike's work was foundational for the study of instrumental

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that can be processed using only a single eye. These monocular cues are often used in two-dimensional art to create the illusion of three-dimensional space.

73. (C) Gestalt Psychologists
The concept of figure and ground was pioneered by Gestalt psychologists, who were interested in how humans organize sensory input into meaningful wholes. They argued that the first step in perception is distinguishing an object, the figure, from its background, the ground. This foundational principle explains how the brain creates structure and focus within a complex and often chaotic visual field.

74. (A) 1-2-3
Resistance to extinction is highest in variable ratio schedules because the unpredictability of reinforcement keeps the organism responding for a long time. Fixed ratio schedules are less resistant because the subject can eventually detect the absence of the expected reward. Continuous reinforcement has the lowest resistance, as the organism quickly notices when every single behavior is no longer being rewarded.

75. (D) Maturation
Maturation refers to the biological and physical growth processes that occur according to a genetic timetable. These changes enable an individual to perform more complex behaviors as they age, such as walking or speaking. Unlike learning, which is driven by experience, maturation is primarily a product of nature, providing the necessary physiological structures for various psychological and behavioral developments.

76. (B) Law of Closure
The law of closure describes the brain's tendency to fill in visual gaps to perceive a complete, whole object. Even when a circle has small interruptions in its boundary, the mind automatically bridges those spaces to recognize the overall form. This principle demonstrates how the perceptual system prioritizes the "whole" over individual, disconnected parts to create a coherent world.

77. (C) Conditioned Stimulus
In classical conditioning, a neutral stimulus is something that initially does not trigger any specific response. However, after being consistently paired with an unconditioned stimulus, it acquires the ability to elicit a response on its own. At this point, the neutral stimulus has become a conditioned stimulus, signaling that the organism has successfully learned the association between the two events.

78. (D) Behaviorism
Edward Thorndike's research on the Law of Effect and trial-and-error learning provided a vital empirical foundation for the development of behaviorism. By focusing on observable behaviors and the objective consequences that shape them, his work moved psychology away from introspection. Later behaviorists, most notably B.F. Skinner, expanded upon Thorndike's principles to create a comprehensive framework for understanding how environments influence behavior.

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79. (A) Statement I is correct, Statement II is incorrect.
Illusions are accurately described as errors in perception where the brain's interpretation of a stimulus does not match physical reality. However, these errors do not prove that the perceptual system is completely unreliable. Instead, illusions highlight the specific rules and shortcuts the brain uses to process information quickly, which are highly effective and accurate in most everyday environmental situations.

80. (B) Grounding a teenager to restrict freedom after a failure.
Negative punishment involves the removal of a pleasant stimulus or privilege to decrease the likelihood of an undesired behavior. Grounding a teenager removes their freedom and social opportunities, which is a desirable condition. This consequence is intended to discourage the behavior that led to the grounding. Other examples involve adding unpleasant stimuli, which is positive punishment.

81. (B) Texture Gradient
Texture gradient is a monocular depth cue based on the observation that the details of a surface appear to change with distance. Nearby objects have a clear, distinct texture with visible individual elements. As the surface recedes, these details become finer, denser, and less distinct.

are less likely to happen again. This principle provided the theoretical foundation for operant conditioning by emphasizing how consequences shape the future probability of an organism's voluntary behaviors.

46. (D) Practice and repetition
Thorndike's Law of Exercise suggests that the bond between a stimulus and a response is strengthened through frequent use and repetition. This principle highlights the importance of practice in the learning process. According to this law, the more often a specific behavior is performed in response to a stimulus, the more ingrained and automatic that connection becomes within the organism's repertoire.

47. (A) Both A and R are true and R is the correct explanation of A.
Thorndike proposed that learning is a process of forming connections between sensory stimuli and behavioral responses. His Law of Effect supports this by explaining that the outcome of an action determines the strength of the S-R bond. Satisfying results reinforce the connection, while unsatisfying ones weaken it. This logic demonstrates how consequences directly influence the gradual development of learned habits.

48. (B) Operant Conditioning
Instrumental conditioning, also known as operant conditioning, is a learning process where behavior is modified by its consequences. The term "instrumental" reflects the idea that the organism's behavior is the instrument or tool used to obtain a reinforcement or avoid a punishment. This form of learning focuses on voluntary actions and how their outcomes influence future behavioral patterns and choices.

49. (B) Incremental Learning
In Thorndike's experiments, the cats did not experience a sudden "aha" moment of insight. Instead, their escape times decreased slowly and steadily over many trials. This gradual improvement illustrates incremental learning, where the correct response is slowly strengthened while incorrect responses are pruned away. This process emphasizes the trial-and-error nature of acquiring new skills through repeated environmental interaction.

50. (A) P-2, Q-4, R-1, S-3
Behavioral and perceptual theories are linked to specific researchers. Ivan Pavlov is known for classical conditioning involving reflexes. Edward Thorndike developed the Law of Effect through his puzzle box studies. B.F. Skinner expanded these ideas into operant conditioning. Finally, Gestalt psychologists focused on the laws of perceptual organization, describing how the mind structures sensory input into meaningful whole forms.

51. (C) Both statements are correct.
A primary difference between conditioning models lies in the nature of the behavior. In operant conditioning, the organism emits voluntary behaviors that operate on the environment to produce consequences. In classical conditioning, the behavior is typically an involuntary, reflexive response elicited by a specific stimulus. Both statements accurately describe these fundamental characteristics of how different types of learning are manifested.

52. (D) The Skinner Box
B.F. Skinner developed the operant conditioning chamber, popularly known as the Skinner box, to study animal behavior. This controlled environment allowed researchers to precisely manipulate reinforcement and punishment. By observing how subjects like rats or pigeons learned to press levers or peck disks for food, Skinner could systematically analyze the principles of reinforcement and their effects on behavioral frequency.

53. (C) Presenting a pleasant stimulus to increase a behavior.
Positive reinforcement is a core principle of operant conditioning that involves the addition of a desirable stimulus following a specific behavior. The goal is to strengthen that behavior, making it more likely to occur in the future. Examples include giving a treat to a dog for sitting or providing praise to a student for completing their homework accurately and on time.

54. (B) Negative Reinforcement
Negative reinforcement occurs when a behavior is strengthened because it results in the removal or avoidance of an unpleasant stimulus. Taking an aspirin is reinforced by the disappearance of a

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learning and directly influenced the later development of B.F. Skinner's theory of operant conditioning and reinforcement.

91. (D) Grouping players in a field based on the color of their uniforms.
The law of similarity suggests that humans naturally group together elements that look alike in terms of color, shape, or size. Seeing players in identical uniforms as members of the same team is a perfect example of this principle. Other Gestalt laws, such as proximity, closure, and figure-ground, describe different methods by which the brain organizes stimuli, but similarity specifically relies on shared appearance.

92. (B) Top-down process of the brain.
Perceptual constancy is a top-down process where the brain uses stored knowledge and expectations to maintain a stable perception of an object. Even as the raw sensory input changes due to distance or lighting, the mind compensates to ensure the object's properties remain consistent. This allows individuals to recognize objects reliably under a wide variety of viewing conditions.

93. (C) Distance Constancy
The primary types of perceptual constancy recognized in psychology are size, shape, color, and brightness constancy. These allow the brain to perceive consistent object properties despite changing sensory input. Distance constancy is not a standard term because distance is a variable that the brain calculates using cues rather than a property that remains "constant" when the environmental perspective shifts.

94. (D) Discrimination
Discrimination is the learning process by which an organism learns to respond to a specific stimulus while ignoring other similar but irrelevant stimuli. This ability is essential for effective adaptation, as it allows the individual to differentiate between signals that lead to reinforcement and those that do not. It represents a refinement of learning that follows the initial period of stimulus generalization.

95. (A) P-4, Q-1, R-2, S-3
Learning theories and researchers are closely linked in psychology. Edward Thorndike is associated with instrumental conditioning and the Law of Effect. Ivan Pavlov developed the principles of classical conditioning. B.F. Skinner is the key figure in operant conditioning. Finally, Max Wertheimer and Kurt Koffka were central to establishing the Gestalt laws of perception, which describe how humans organize visual information.

96. (B) Operant Conditioning
Operant conditioning is a learning framework where the consequences of a behavior determine its future frequency. If an action is followed by reinforcement, it is likely to be repeated; if followed by punishment, it becomes less likely. This focus on consequences distinguishes operant conditioning from classical conditioning, which instead emphasizes the association between two stimuli presented regardless of the subject's behavior.

97. (B) A learned reaction to a previously neutral stimulus.
A conditioned response is a learned behavior that is elicited by a conditioned stimulus. It develops after the organism has repeatedly experienced the pairing of a neutral stimulus with an unconditioned stimulus. Unlike innate reflexes, which are unlearned, the conditioned response represents an acquired association that allows the organism to anticipate and prepare for significant environmental events before they occur.

98. (A) Common Fate
The Law of Common Fate is a Gestalt principle suggesting that elements moving together in the same direction or at the same speed are perceived as a single group. This helps individuals track multiple moving objects as a unified entity, such as a flock of birds or a school of fish. It is distinct from similarity or proximity, which focus on static features.

99. (C) It is relatively permanent.
Learning is characterized by a relatively permanent change in behavior or knowledge. This distinguishes it from temporary changes caused by fatigue, mood, or substances, which pass quickly. While learning is lasting, it is not necessarily permanent because forgetting or extinction can occur. Furthermore, learning is not exclusive to humans and is fundamentally

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(B) Chunking can effectively increase the amount of data held in STM.
(C) STM can hold an unlimited amount of information if rehearsed.
(D) Information in STM typically fades within 20 to 30 seconds without rehearsal.

10. What is the most appropriate description of Long-Term Memory (LTM)?
(A) A system for permanently storing unlimited amounts of information
(B) A temporary holding station for sensory information
(C) A workspace for manipulating information during cognitive tasks
(D) A storehouse that holds information for exactly 24 hours

11. Match List I with List II and select the correct answer using the codes given below:
List I: (Concept/Model)
P. Levels of Processing
Q. Multi-Store Model
R. Working Memory Model
S. Magic Number 7±2
List II: (Proponent/Feature)
1. Baddeley and Hitch
2. Craik and Lockhart
3. George Miller
4. Atkinson and Shiffrin
Codes:
(A) P-2, Q-4, R-1, S-3
(B) P-4, Q-2, R-3, S-1
(C) P-1, Q-3, R-2, S-4
(D) P-3, Q-1, R-4, S-2

12. How long does information typically last in the iconic sensory store?
(A) Less than one second
(B) 3 to 4 seconds
(C) 15 to 20 seconds
(D) 1 to 2 minutes

13. Read the following statements and select the correct option.
Statement I: Echoic memory refers to the sensory memory for auditory stimuli.
Statement II: Echoic memory typically has a shorter duration than iconic memory.
(A) Statement I is correct, but Statement II is incorrect.
(B) Statement I is incorrect, but Statement II is correct.
(C) Both statements are correct.
(D) Both statements are incorrect.

14. Which of the following is an INCORRECT pair regarding memory types?
(A) Episodic Memory — Personal life events
(B) Semantic Memory — General knowledge and facts
(C) Procedural Memory — Skills and habits
(D) Explicit Memory — Unconscious motor skills

15. Consider the following statements regarding Long-Term Memory:
I. It includes both declarative and non-declarative memory.
II. Semantic memory is a sub-type of explicit memory.
III. Implicit memory requires conscious effort for retrieval.
Which of the above statement(s) is/are correct?
(A) I and III only
(B) II and III only
(C) I and II only
(D) I, II, and III

16. How is "Explicit Memory" defined in psychological terms?
(A) Memory that is retrieved automatically and unconsciously
(B) Memory that involves conscious, intentional recollection
(C) Memory for motor skills and classical conditioning tasks
(D) Memory that exists only for immediate sensory experiences

17. If a person remembers the capital of France is Paris, they are utilizing which type of memory?
(A) Episodic memory
(B) Semantic memory
(C) Procedural memory
(D) Echoic memory

18. The following question consists of two statements—Assertion (A) and Reason (R). Answer the question by selecting the appropriate option.
Assertion (A): Maintenance rehearsal is more

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CHAPTER 18
Memory and Forgetting

1. In the context of psychology, which of the following best defines memory?
(A) The physical capacity of the brain to store biological information
(B) The mental process of retaining and retrieving information over time
(C) A passive process of recording external events without modification
(D) The involuntary reflex of reacting to previous environmental stimuli

2. Which stage of memory involves the initial process of transforming sensory input into a form that the memory system can use?
(A) Encoding
(B) Storage
(C) Retrieval
(D) Consolidation

3. Which of the following statements about the nature of memory is correct?
(A) Memory is a static and unchanging record of the past.
(B) Retrieval is the process of keeping information in the brain over time.
(C) Memory involves an active constructive process rather than simple recording.
(D) Once information is stored in long-term memory, it can never be lost.

4. Which of the following is NOT considered one of the three primary stages of the memory process?
(A) Retrieval
(B) Encoding
(C) Storage
(D) Rehearsal

5. Consider the following statements regarding sensory memory:
I. It has a very large capacity but a very brief duration.
II. It holds information in its raw, unanalyzed form.
III. Information stays in sensory memory for several minutes.
Which of the above statement(s) is/are correct?
(A) I and II only
(B) II and III only
(C) I and III only
(D) I, II, and III

6. Which of the following pairs is correctly matched?
(A) Iconic Memory — Auditory sensory store
(B) Short-Term Memory — Miller's Magic Number 7±2
(C) Echoic Memory — Visual sensory store
(D) Long-Term Memory — Duration of 20 seconds

7. A student remembers a long string of numbers by grouping them into significant dates. This process is known as:
(A) Maintenance rehearsal
(B) Displacement
(C) Retroactive interference
(D) Chunking

8. The following question consists of two statements—Assertion (A) and Reason (R). Answer the question by selecting the appropriate option.
Assertion (A): Iconic memory has a shorter duration than echoic memory.
Reason (R): Visual information fades within a fraction of a second, while auditory traces can linger for several seconds.
(A) Both A and R are true and R is the correct explanation of A.
(B) Both A and R are true but R is not the correct explanation of A.
(C) A is true but R is false.
(D) A is false but R is true.

9. Which of the following statements regarding the capacity of Short-Term Memory (STM) is INCORRECT?
(A) The capacity is generally limited to 7 plus or minus 2 items.

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responses performed by the organism. Interval schedules are determined by the amount of time that has passed, reinforcing the first response after a specific or average duration of time.

64. (B) Checking for text messages that arrive at random times.
Checking for text messages illustrates a variable interval schedule because the "reinforcement" (the message) arrives at unpredictable times. The user does not know when the next message will appear, so they check periodically. This is different from fixed intervals like salaries or ratio schedules like car sales bonuses, which depend on either set times or a specific number of actions.

65. (B) It states that rewards are the only way to strengthen behavior.
Thorndike's Law of Exercise focuses on the role of practice and repetition in strengthening S-R connections, rather than the role of rewards. While rewards are central to his Law of Effect, the Law of Exercise emphasizes that use strengthens bonds while disuse weakens them. Later, Thorndike modified this view, acknowledging that repetition alone is often insufficient for effective learning to occur.

66. (A) Classical involves involuntary reflexes, Operant involves voluntary actions.
The fundamental distinction between these two conditioning types is the nature of the behavior being modified. Classical conditioning deals with involuntary, automatic physiological or emotional responses to stimuli. Operant conditioning, however, focuses on voluntary behaviors that are controlled by their consequences. While both involve associative learning, they apply to different categories of behavioral output within an organism's psychological repertoire.

67. (A) Both A and R are true and R is the correct explanation of A.
Variable ratio schedules are known for producing high and very steady rates of behavioral responding. This occurs because the reinforcement is unpredictable; the organism cannot determine which specific response will be the one that triggers the reward. As a result, the subject continues to respond rapidly and consistently, as every single action has the potential to be reinforced.

68. (D) Fixed Interval
A post-reinforcement pause is most commonly observed in fixed interval and fixed ratio schedules. In a fixed interval schedule, the organism learns that reinforcement is only available after a set time. Consequently, responding often drops significantly immediately after a reward and then gradually increases as the end of the interval approaches, creating a characteristic scalloped pattern in behavioral data.

69. (C) Continuity
The Gestalt law of continuity suggests that the human eye tends to follow the smoothest path when viewing lines. Instead of seeing separate, disconnected segments, the brain organizes visual stimuli into continuous, flowing patterns. This principle explains why individuals perceive intersecting lines as two single uninterrupted paths rather than multiple shorter lines meeting at a central point in space.

70. (B) P-3, Q-1, R-2, S-4
Learning involves several distinct phases and processes. Acquisition marks the initial formation of the link. Extinction describes the weakening of this link when reinforcement or the unconditioned stimulus is removed. Generalization occurs when similar stimuli trigger the response. Discrimination is the refined ability to respond only to a specific stimulus, ensuring that the behavior is applied appropriately in the environment.

71. (D) Discrimination
When a child distinguishes between two similar but distinct shapes, they are demonstrating the process of discrimination. This involves learning to respond differently to stimuli that share some characteristics but are not identical. By recognizing the specific features that separate a square from a rectangle, the child refines their conceptual understanding and ensures their responses are accurate and contextually appropriate.

72. (A) Retinal Disparity
Retinal disparity is a binocular depth cue because it requires comparing slightly different images from both eyes to perceive distance. In contrast, monocular cues like interposition, relative size, and texture gradient provide depth information

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effective than elaborative rehearsal for long-term retention.
Reason (R): Elaborative rehearsal involves connecting new information to existing knowledge in LTM.
(A) Both A and R are true and R is the correct explanation of A.
(B) Both A and R are true but R is not the correct explanation of A.
(C) A is true but R is false.
(D) A is false but R is true.

19. Which of the following statements about the "Atkinson-Shiffrin Model" is correct?
(A) It suggests memory consists of a single, unified store.
(B) It emphasizes depth of processing over structural stores.
(C) It proposes three distinct stages: Sensory, Short-term, and Long-term.
(D) It focuses primarily on the biological locations of memories.

20. Which of the following is NOT a characteristic of the "Levels of Processing" model?
(A) Shallow processing primarily involves basic structural encoding.
(B) Deep processing involves meaningful semantic encoding.
(C) Deeper processing leads to significantly better retention.
(D) Information must pass through a fixed sequence of stores.

21. Match List I with List II and select the correct answer using the codes given below:
List I: (Term)
P. Retrieval
Q. Encoding
R. Storage
S. Consolidation
List II: (Definition)
1. Maintaining information over time
2. Recovering information from memory stores
3. Process of stabilizing a memory trace
4. Converting stimuli into a usable code
Codes:
(A) P-2, Q-4, R-1, S-3
(B) P-4, Q-2, R-3, S-1
(C) P-1, Q-3, R-2, S-4
(D) P-2, Q-1, R-4, S-3

22. A person can remember a 10-digit phone number by splitting it into three groups (e.g., area code, prefix, line number). This is a practical application of:
(A) Sensory decay
(B) Chunking
(C) Retrograde amnesia
(D) State-dependent retrieval

23. Which retrieval method involves identifying previously learned information from a set of options?
(A) Recall
(B) Relearning
(C) Reconstruction
(D) Recognition

24. Which of the following statements about forgetting is INCORRECT?
(A) The Ebbinghaus curve shows that forgetting is slowest immediately after learning.
(B) Forgetting can occur due to the failure of initial encoding into memory.
(C) Interference is a major cause of forgetting in long-term memory stores.
(D) Motivated forgetting may involve the active repression of painful memories.

25. Consider the following statements about the Working Memory Model:
I. It was proposed by Baddeley and Hitch.
II. It replaces the concept of a unitary Short-Term Memory.
III. It consists of components like the central executive and phonological loop.
Which of the above statement(s) is/are correct?
(A) I and II only
(B) II and III only
(C) I and III only
(D) I, II, and III

26. What is the psychological definition of "Forgetting"?
(A) The inability to retrieve or access previously stored information
(B) The permanent destruction of all brain cells containing data
(C) The intentional deletion of irrelevant information by the brain

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over time.
(D) Organizing small pieces of information into larger, meaningful units.

85. The "Nature of Memory" implies that memory is:
(A) Only a biological function with no psychological component.
(B) A fixed capacity that cannot be improved.
(C) A process of encoding, storage, and retrieval.
(D) Solely dependent on the intensity of the stimulus.

86. A person who can no longer remember his name or where he lived before a car accident is suffering from:
(A) Anterograde amnesia
(B) Retrograde amnesia
(C) Proactive interference
(D) Retrieval failure

87. Which of the following is a primary feature of the "Atkinson-Shiffrin Model"?
(A) LTM has a very limited duration.
(B) All information entering sensory memory is eventually processed.
(C) STM and LTM are the same system.
(D) Attention is the key to moving info from Sensory to STM.

88. Which of the following is NOT a stage in the three-stage model of memory?
(A) Working Memory
(B) Sensory Memory
(C) Short-term Memory
(D) Long-term Memory

89. Read the following statements and select the correct option.
Statement I: Retroactive interference is when old info blocks new info.
Statement II: Proactive interference is when old info blocks new info.
(A) Statement I is correct, but Statement II is incorrect.
(B) Statement I is incorrect, but Statement II is correct.
(C) Both statements are correct.
(D) Both statements are incorrect.

90. Which of the following pairs is correctly matched?
(A) Ebbinghaus — Savings method and Forgetting Curve
(B) Mnemonics — Forgetting causes
(C) Interference — Growth of memory traces
(D) Displacement — A mechanism for unlimited capacity in LTM

91. Which of the following statements regarding "Repression" is INCORRECT?
(A) It was proposed by Sigmund Freud.
(B) It involves the motivated forgetting of painful memories.
(C) It is a defensive mechanism of the mind.
(D) It is a conscious process of trying to forget.

92. What is "State-Dependent Memory"?
(A) Memory based on the physical location of the person.
(B) Memory based on the internal state (like mood) of the person.
(C) Memory that only works in a state of high arousal.
(D) Memory for the names of different states/countries.

93. A student uses the acronym "VIBGYOR" to remember the colors of the rainbow. This is an example of:
(A) Chunking
(B) Maintenance rehearsal
(C) A mnemonic
(D) Semantic encoding

94. Which type of sensory memory has the longest duration?
(A) Iconic
(B) Haptic
(C) Olfactory
(D) Echoic

95. What is the most appropriate description of "Procedural Memory"?
(A) Memory for how to perform specific actions or skills
(B) Memory for specific dates and historical events
(C) Memory for word meanings, language, and abstract concepts
(D) Memory for processing visual images and

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II. Memory loss is typically most rapid shortly after the learning period.
III. Overlearning has been found to have no effect on the rate of forgetting.
Which of the above statement(s) is/are correct?
(A) I and II only
(B) II and III only
(C) I and III only
(D) I, II, and III

36. An individual is able to remember a grocery list by visualizing each item in a specific room of their house. This memory improvement technique is:
(A) Rehearsal
(B) Chunking
(C) Consolidation
(D) A mnemonic device

37. What is the primary characteristic of "Implicit Memory"?
(A) It requires significant conscious effort to bring to mind.
(B) It stores declarative facts like names of historical figures.
(C) It is expressed through performance rather than conscious recall.
(D) It is easily and accurately described using spoken language.

38. The following question consists of two statements—Assertion (A) and Reason (R). Answer the question by selecting the appropriate option.
Assertion (A): State-dependent memory suggests that being in the same emotional state during encoding and retrieval improves recall.
Reason (R): Internal cues act as powerful triggers for retrieving information from long-term memory.
(A) Both A and R are true and R is the correct explanation of A.
(B) Both A and R are true but R is not the correct explanation of A.
(C) A is true but R is false.
(D) A is false but R is true.

39. Which of the following is a correct statement regarding "Episodic Memory"?
(A) It contains general knowledge, facts, and rules of logic.
(B) It is a type of non-declarative memory.
(C) It is primarily stored in the sensory register for a short time.
(D) It involves memories of specific personal experiences and events.

40. Read the following statements and select the correct option.
Statement I: Rehearsal is a process used to keep information in short-term memory.
Statement II: Organization of information into meaningful categories can improve long-term memory.
(A) Statement I is correct, but Statement II is incorrect.
(B) Statement I is incorrect, but Statement II is correct.
(C) Both statements are correct.
(D) Both statements are incorrect.

41. Match List I with List II and select the correct answer using the codes given below:
List I: (Type of Memory)
P. Semantic Memory
Q. Episodic Memory
R. Procedural Memory
S. Iconic Memory
List II: (Example)
1. Remembering how to ride a bicycle
2. Remembering your 10th birthday party
3. A brief afterimage of a lightning bolt
4. Knowing that water freezes at 0 degrees Celsius
Codes:
(A) P-4, Q-2, R-1, S-3
(B) P-2, Q-4, R-3, S-1
(C) P-1, Q-3, R-2, S-4
(D) P-4, Q-1, R-2, S-3

42. Which of the following is an INCORRECT statement about "Proactive Interference"?
(A) It is a major cause of forgetting in the decay theory.
(B) It involves old information hindering the learning of new information.
(C) An example is calling your new partner by your ex-partner's name.
(D) It occurs when prior learning disrupts the retrieval of recent learning.

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ANSWERS

1. (B) The mental process of retaining and retrieving information over time
Memory is defined as the mental capacity to encode, store, and retrieve information over time. It allows individuals to retain experiences and knowledge, facilitating learning and adaptation. This cognitive process involves the initial intake of data, its maintenance within the brain's storage systems, and the subsequent recovery of that information when needed for various tasks or decision-making.

2. (A) Encoding
Encoding represents the initial stage of memory where sensory inputs are transformed into a usable mental representation. This process involves converting physical stimuli, such as light or sound, into neural codes that the memory system can store. It is a critical step because information that is not properly encoded cannot be successfully maintained or retrieved during later cognitive activities.

3. (C) Memory involves an active constructive process rather than simple recording.
Memory is not a static or perfect recording of external events. Instead, it is an active and constructive process where information is organized and sometimes modified during encoding and retrieval. This means that memories can be influenced by prior knowledge, expectations, and new information, rather than remaining as an unchanging and objective transcript of the past experiences.

4. (D) Rehearsal
The three primary stages of the memory process are encoding, storage, and retrieval. Encoding involves processing information into the system, storage refers to maintaining that information over time, and retrieval is the recovery of the information. While rehearsal is a technique used to keep information in short-term memory or transfer it to long-term memory, it is not a stage.

5. (A) I and II only
Sensory memory serves as a brief storage stage for incoming raw information from the environment. It possesses a high capacity to hold data in an unanalyzed form, but this information fades extremely quickly, often within a few seconds. While Statement I and II accurately describe these specific features, Statement III is incorrect because the duration is measured in seconds.

6. (B) Short-Term Memory — Miller's Magic Number 7±2
George Miller famously identified that the capacity of short-term memory is limited to approximately seven items, plus or minus two. This concept is a fundamental characteristic of human memory limits. Other pairings are incorrect because iconic memory is visual, echoic memory is auditory, and long-term memory has a duration that can last for a lifetime rather than twenty seconds.

7. (D) Chunking
Chunking is a memory strategy that involves organizing individual pieces of information into larger, meaningful units or groups. By creating these significant associations, such as turning a string of digits into a recognizable date, an individual can effectively increase the functional capacity of their short-term memory. This process makes it easier to retain and recall complex or long sequences.

8. (A) Both A and R are true and R is the correct explanation of A.
Iconic memory, which stores visual sensory information, typically lasts for less than half a second. In contrast, echoic memory, which stores auditory information, can linger for several seconds. This difference in duration allows the brain enough time to process spoken language. Because visual stimuli fade much faster than auditory traces, the assertion and the reason are both accurately stated.

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(C) P-3, Q-4, R-1, S-2
(D) P-2, Q-3, R-4, S-1

52. Read the following statements and select the correct option.
Statement I: Episodic memory and semantic memory are both types of declarative memory.
Statement II: Procedural memory is a type of explicit memory.
(A) Statement I is correct, but Statement II is incorrect.
(B) Statement I is incorrect, but Statement II is correct.
(C) Both statements are correct.
(D) Both statements are incorrect.

53. Which of the following statements about "Decay Theory" is INCORRECT?
(A) It proposes that memories fade due to the mere passage of time.
(B) It is primarily used to explain forgetting in Sensory Memory and STM.
(C) It is the most widely accepted explanation for forgetting in LTM.
(D) It suggests that the memory trace (engram) physically disintegrates.

54. Arrange the stages of the memory process in the correct sequence as proposed by the Atkinson-Shiffrin model:
(A) Short-term memory → Sensory memory → Long-term memory
(B) Sensory memory → Short-term memory → Long-term memory
(C) Long-term memory → Short-term memory → Sensory memory
(D) Sensory memory → Long-term memory → Short-term memory

55. If an individual tries to memorize the letters "U", "P", "P", "S", "C" as one single unit "UPPSC", they are using:
(A) Maintenance rehearsal
(B) Elaborative rehearsal
(C) Retrieval cues
(D) Chunking

56. In the memory process, "Storage" refers to:
(A) The maintenance of encoded information over time
(B) The initial recording of information
(C) The process of bringing information to consciousness
(D) The physical movement of the brain during learning

57. Which of the following is a correct statement regarding "Echoic Memory"?
(A) It lasts for approximately 0.5 seconds.
(B) It is the visual component of sensory memory.
(C) It allows for a "playback" of auditory stimuli for a few seconds.
(D) It has a very limited capacity compared to that of iconic memory.

58. Which type of forgetting is most associated with the concept of keeping traumatic memories out of conscious awareness?
(A) Repression
(B) Retrieval Failure
(C) Decay
(D) Retroactive Interference

59. Which of the following pairs is correctly matched?
(A) Semantic Memory — Specific personal experience
(B) Implicit Memory — Conscious recollection
(C) Iconic Memory — Auditory information
(D) Procedural Memory — Skills like typing or driving

60. What is "Anterograde Amnesia"?
(A) The loss of memories for events that occurred before a brain injury.
(B) The inability to form new long-term memories after a brain injury.
(C) A temporary loss of memory due to stress.
(D) Forgetting how to perform motor skills.

61. Which of the following is an INCORRECT statement about "Retrieval Failure"?
(A) It is often called the "Tip-of-the-tongue" phenomenon.
(B) It happens when there is a lack of effective retrieval cues.
(C) It occurs because the memory has been completely erased from the brain.
(D) Information is stored in LTM but cannot be accessed.

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43. Which process refers to the location and recovery of information from the memory system?
(A) Encoding
(B) Storage
(C) Attention
(D) Retrieval

44. Which of the following is NOT a method for improving memory?
(A) Mnemonics
(B) Massed practice without breaks
(C) Rehearsal
(D) Organization of material

45. Consider the following statements about interference theory:
I. Proactive interference involves old memories moving forward to disrupt new ones.
II. Retroactive interference involves new memories moving backward to disrupt old ones.
III. Interference is more likely to occur when the two sets of information are very different.
Which of the above statement(s) is/are correct?
(A) I and II only
(B) II and III only
(C) I and III only
(D) I, II, and III

46. What does "Duration" refer to in the context of memory?
(A) The total amount of diverse information a memory store can hold.
(B) The speed at which a person can recall a fact.
(C) The biological weight of a memory trace.
(D) The length of time information can be held in a memory store.

47. Which of the following pairs is correctly matched?
(A) Retrograde Amnesia — Loss of memories prior to trauma
(B) Proactive Interference — New interfering with Old
(C) Anterograde Amnesia — Loss of past memories
(D) Retroactive Interference — Old interfering with New

48. The following question consists of two statements—Assertion (A) and Reason (R). Answer the question by selecting the appropriate option.
Assertion (A): According to the Atkinson-Shiffrin model, if information is not rehearsed in STM, it is lost.
Reason (R): Displacement and decay are the primary reasons information leaves the short-term store.
(A) Both A and R are true and R is the correct explanation of A.
(B) Both A and R are true but R is not the correct explanation of A.
(C) A is true but R is false.
(D) A is false but R is true.

49. Which of the following is the most appropriate example of "State-Dependent Memory"?
(A) Remembering a list better because you are in the same classroom.
(B) Recalling a happy event more easily when you are currently happy.
(C) Forgetting a phone number because you didn't write it down.
(D) Learning a skill by practicing it repeatedly.

50. A witness is asked to identify a suspect from a physical lineup. This memory task is an example of:
(A) Recognition
(B) Recall
(C) Implicit memory
(D) Echoic memory

51. Match List I with List II and select the correct answer using the codes given below:
List I: (Memory Term)
P. Miller's Number
Q. Chunking
R. Mnemonics
S. Forgetting Curve
List II: (Description)
1. Grouping items into meaningful units
2. 7 ± 2 units of information
3. Graphical representation of memory loss over time
4. Strategies for enhancing memory
Codes:
(A) P-2, Q-1, R-4, S-3
(B) P-1, Q-2, R-3, S-4

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(B) It includes facts like "the sun rises in the east."
(C) It is tied to specific times and places of learning.
(D) It is a component of long-term explicit memory.

74. What is the most appropriate description of "Motivated Forgetting"?
(A) An unconscious or conscious attempt to push unpleasant memories out of awareness
(B) Forgetting due to a significant lack of personal interest in the subject matter
(C) Forgetting information that is no longer useful for navigating daily life
(D) Forgetting that occurs solely because of extreme physical exhaustion

75. A researcher shows that participants remember words better if they are asked about the word's meaning rather than its font. This supports:
(A) Multi-store model
(B) Decay theory
(C) Working memory model
(D) Levels of processing model

76. Which of the following pairs is correctly matched?
(A) Craik and Lockhart — Sensory stores
(B) Miller — 7 ± 2 items in STM
(C) Baddeley — Levels of Processing
(D) Atkinson — Forgetting Curve

77. Which of the following is NOT a type of interference in memory?
(A) Proactive
(B) Retroactive
(C) Anterograde
(D) Associative

78. The "Encoding Specificity Principle" is primarily concerned with the relationship between:
(A) STM and LTM
(B) Rehearsal and Storage
(C) Iconic and Echoic memory
(D) Encoding and Retrieval contexts

79. Read the following statements and select the correct option.
Statement I: Episodic memory allows us to mentally travel back in time.
Statement II: Semantic memory is a type of implicit memory.
(A) Statement I is correct, but Statement II is incorrect.
(B) Statement I is incorrect, but Statement II is correct.
(C) Both statements are correct.
(D) Both statements are incorrect.

80. According to research on capacity, what is the limit of Short-Term Memory items proposed by George Miller?
(A) 3 ± 1 items
(B) 5 ± 2 items
(C) 7 ± 2 items
(D) 9 ± 1 items

81. Which of the following statements about memory improvement is INCORRECT?
(A) Mnemonics can help in organizing information.
(B) Massed practice (cramming) is better than distributed practice for LTM.
(C) Elaborative rehearsal is more effective than maintenance rehearsal.
(D) Self-referencing can improve memory retention.

82. Which of the following statements about "Retrieval" is correct?
(A) Recognition is generally easier than recall.
(B) It is the process of putting information into memory.
(C) Retrieval only happens from Short-Term Memory.
(D) Once information is stored, retrieval is always perfect.

83. Which of the following is an INCORRECT pair?
(A) Semantic — General Facts
(B) Episodic — Personal History
(C) Procedural — Knowledge of Rules
(D) Implicit — Skill Performance

84. What is the most appropriate definition of "Chunking"?
(A) Repeating information over and over again to keep it in short-term memory.
(B) Breaking down complex concepts into simpler definitions.
(C) Forgetting information in bits and pieces

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(D) A disorder that only occurs after physical head trauma

27. Read the following statements and select the correct option.
Statement I: Proactive interference occurs when new learning interferes with the recall of old information.
Statement II: Retroactive interference occurs when old learning interferes with the recall of new information.
(A) Statement I is correct, but Statement II is incorrect.
(B) Statement I is incorrect, but Statement II is correct.
(C) Both statements are correct.
(D) Both statements are incorrect.

28. The following question consists of two statements—Assertion (A) and Reason (R). Answer the question by selecting the appropriate option.
Assertion (A): Retrieval failure occurs even when information is technically present in long-term memory.
Reason (R): Forgetting is often caused by the absence of appropriate retrieval cues.
(A) Both A and R are true and R is the correct explanation of A.
(B) Both A and R are true but R is not the correct explanation of A.
(C) A is true but R is false.
(D) A is false but R is true.

29. Which of the following is a correctly matched pair?
(A) Procedural Memory — Explicit Memory
(B) Semantic Memory — Implicit Memory
(C) Episodic Memory — Explicit Memory
(D) Conditioned Responses — Declarative Memory

30. Which principle states that retrieval is more effective when the context at the time of retrieval matches the context at the time of encoding?
(A) Decay Theory
(B) Miller's Law
(C) Levels of Processing
(D) Encoding Specificity Principle

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31. Match List I with List II and select the correct answer using the codes given below:
List I: (Forgetting Cause)
P. Decay
Q. Displacement
R. Interference
S. Repression
List II: (Description)
1. New information pushes out old information in STM
2. Memory traces fade over time due to disuse
3. Motivated forgetting of traumatic events
4. Competing information hinders retrieval
Codes:
(A) P-2, Q-1, R-4, S-3
(B) P-1, Q-2, R-3, S-4
(C) P-4, Q-3, R-2, S-1
(D) P-2, Q-4, R-1, S-3

32. Which of the following is NOT true regarding sensory memory?
(A) It is the first stage of the Atkinson-Shiffrin model.
(B) It has a very limited capacity, holding only 2-3 items.
(C) Iconic memory is a form of sensory memory.
(D) Information is held for a very brief period.

33. When you are asked to write an essay on a topic you studied last week, which retrieval task are you performing?
(A) Recognition
(B) Recall
(C) Relearning
(D) Priming

34. Which of the following pairs is INCORRECTLY matched regarding amnesia?
(A) Anterograde Amnesia — Forgetting one's childhood only
(B) Anterograde Amnesia — Inability to form new memories after trauma
(C) Retrograde Amnesia — Loss of memories formed before trauma
(D) Retrograde Amnesia — Difficulty recalling past events

35. Consider the following statements regarding research on the forgetting curve:
I. Nonsense syllables are often used to study memory in controlled settings.

patterns only

96. Which of the following is a correct statement about "Recall"?
(A) It involves choosing the correct answer from a provided list of options.
(B) It requires the person to produce information from memory without cues.
(C) It is always inherently easier than recognition.
(D) It only applies to the sensory memory store.

97. Read the following statements and select the correct option.
Statement I: Information in Short-term memory lasts about 20-30 seconds without rehearsal.
Statement II: Long-term memory has a limit of about 1,000,000 gigabytes.
(A) Statement I is correct, but Statement II is incorrect.
(B) Statement I is incorrect, but Statement II is correct.
(C) Both statements are correct.
(D) Both statements are incorrect.

98. Which of the following is NOT a cause of forgetting?
(A) Cognitive Enhancement
(B) Decay
(C) Interference
(D) Retrieval Failure

99. Which of the following pairs is INCORRECTLY matched?
(A) Encoding — Processing information
(B) Storage — Maintaining information
(C) Retrieval — Losing information
(D) Mnemonics — Memory aids

100. The "Nature of Memory" suggests that it is:
(A) A purely biological reflex with no cognitive processing involved.
(B) A mystical power of the mind that cannot be explained by science.
(C) An error-free recording of reality stored permanently in the brain.
(D) A system for receiving, encoding, storing, and retrieving information.

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62. Read the following statements and select the correct option.
Statement I: The Working Memory model suggests that the central executive manages the flow of information.
Statement II: The phonological loop deals with visual and spatial information.
(A) Statement I is correct, but Statement II is incorrect.
(B) Statement I is incorrect, but Statement II is correct.
(C) Both statements are correct.
(D) Both statements are incorrect.

63. A person struggles to remember their old phone number because they have recently learned a new one. This is an example of:
(A) Retroactive interference
(B) Proactive interference
(C) Retrieval failure
(D) Decay

64. Identify the correct order of memory stages based on their duration (from shortest to longest):
(A) Short-term → Long-term → Sensory
(B) Sensory → Long-term → Short-term
(C) Sensory → Short-term → Long-term
(D) Long-term → Short-term → Sensory

65. Which of the following refers to the theory that forgetting occurs because new information pushes out existing information in a limited-capacity store?
(A) Decay
(B) Displacement
(C) Interference
(D) Repression

66. Which of the following pairs is INCORRECTLY matched?
(A) Ebbinghaus — Chunking
(B) Atkinson-Shiffrin — Multi-store model
(C) Craik & Lockhart — Levels of processing
(D) Baddeley — Working memory

67. Which of the following is NOT a component of the Working Memory model?
(A) Phonological loop
(B) Visuo-spatial sketchpad
(C) Sensory register
(D) Central executive

68. An actor learns their lines by relating the script to personal experiences. This is an example of:
(A) Maintenance rehearsal
(B) Displacement
(C) Retrograde amnesia
(D) Elaborative rehearsal

69. "Retrograde Amnesia" is defined as:
(A) The inability to recall events that happened after a trauma.
(B) The loss of semantic knowledge only.
(C) The inability to recall events that occurred before a trauma.
(D) The failure to move information from STM to LTM.

70. Which of the following statements about LTM capacity is correct?
(A) It is limited to approximately 100,000 items.
(B) It is effectively unlimited.
(C) It decreases significantly as we reach adulthood.
(D) It can only hold information for up to 10 years.

71. Read the following statements and select the correct option.
Statement I: Explicit memory is also known as declarative memory.
Statement II: Implicit memory is also known as non-declarative memory.
(A) Statement I is correct, but Statement II is incorrect.
(B) Statement I is incorrect, but Statement II is correct.
(C) Both statements are correct.
(D) Both statements are incorrect.

72. In sensory memory, auditory information is stored in the:
(A) Echoic store
(B) Iconic store
(C) Haptic store
(D) Semantic store

73. Which of the following is an INCORRECT statement about Semantic Memory?
(A) It involves general knowledge about the world.

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9. (C) STM can hold an unlimited amount of information if rehearsed.
Short-term memory is characterized by a strictly limited capacity and duration. While rehearsal can help maintain information for a longer period, it does not increase the actual amount of data the store can hold at once. The capacity remains approximately seven items. Information typically fades within thirty seconds unless it is actively processed or transferred into the long-term store.

10. (A) A system for permanently storing unlimited amounts of information
Long-term memory is the final stage of the dual-memory model, serving as a vast storehouse for information. Unlike sensory or short-term memory, it has a capacity that is effectively unlimited and can hold information for very long periods, ranging from days to an entire lifetime. It stores various types of knowledge, including facts, personal experiences, and motor skills.

11. (A) P-2, Q-4, R-1, S-3
The multi-store model was developed by Atkinson and Shiffrin, while the levels of processing framework was introduced by Craik and Lockhart. Working memory is a concept refined by Baddeley and Hitch to explain active processing. George Miller is known for identifying the capacity of short-term memory as seven items. Matching these correctly leads to the identification of the code.

12. (A) Less than one second
Iconic memory is the visual component of the sensory memory system. It holds a snapshot of a visual stimulus for an extremely brief duration, typically lasting less than one second. This rapid fading allows the visual system to constantly update with new information from the environment, preventing old images from overlapping with and blurring the perception of current visual inputs.

13. (A) Statement I is correct, but Statement II is incorrect.
Echoic memory refers to the sensory store for auditory stimuli, which is correct. However, echoic memory actually has a longer duration than iconic memory, lasting for several seconds compared to the fraction of a second for visual traces. Therefore, Statement I accurately defines the term, while Statement II incorrectly compares the temporal duration of these two different sensory memory types.

14. (D) Explicit Memory — Unconscious motor skills
Explicit memory involves the conscious and intentional recollection of information, such as facts or personal events. Unconscious motor skills, like riding a bike or typing, are actually classified as procedural or implicit memory. Episodic memory relates to life events, semantic memory covers general facts, and procedural memory involves habits, making the pair regarding explicit memory and unconscious skills incorrect.

15. (C) I and II only
Long-term memory is divided into declarative and non-declarative types. Semantic memory is a sub-type of declarative memory, which is also called explicit memory. However, implicit memory, which includes procedural skills, does not require conscious effort for retrieval; it is expressed through performance. Therefore, only the first two statements correctly describe the structure and characteristics of the long-term memory system.

16. (B) Memory that involves conscious, intentional recollection
Explicit memory, also known as declarative memory, refers to the conscious and deliberate recall of information. This includes facts, concepts, and specific personal experiences that an individual can actively bring to mind and describe verbally. It is distinct from implicit memory, which operates automatically and influences behavior without the need for conscious awareness or intentional effort during the retrieval process.

17. (B) Semantic memory
Semantic memory is a type of explicit long-term memory that stores general world knowledge, facts, and concepts. It is not tied to a specific time or place where the information was learned. Remembering that Paris is the capital of France is a classic example of using semantic memory to access factual information about the world that is widely known.

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36. (D) A mnemonic device
The method described, known as the method of loci, is a classic mnemonic device. It involves associating items to be remembered with specific physical locations in a familiar environment. By mentally "walking through" the house during retrieval, the individual uses spatial cues to trigger the recall of the list. Mnemonic devices are strategies designed to enhance memory through organization and association.

37. (C) It is expressed through performance rather than conscious recall.
Implicit memory refers to the influence of past experiences on current behavior without conscious awareness of those experiences. It is often called non-declarative memory because it cannot be easily put into words. It is expressed through improved performance on tasks, such as riding a bike or typing, rather than through the intentional and conscious recollection of specific facts or personal events.

38. (A) Both A and R are true and R is the correct explanation of A.
State-dependent memory suggests that retrieval is more effective when an individual's internal emotional or physiological state matches the state they were in during encoding. Internal cues, such as mood or level of arousal, serve as triggers for accessing stored information. Because these internal states act as effective retrieval cues, the assertion and the reason are both true and logically linked.

39. (D) It involves memories of specific personal experiences and events.
Episodic memory is a type of explicit long-term memory that contains records of specific personal experiences and life events. These memories are typically associated with a particular time and place, allowing individuals to mentally "re-experience" the past. General knowledge and facts are part of semantic memory, and logical rules are also distinct from the personal narrative found in episodic memory.

40. (C) Both statements are correct.
Rehearsal is a vital process for maintaining information within short-term memory and preventing it from decaying or being displaced. Additionally, organizing information into meaningful categories, such as through hierarchies or chunking, significantly improves long-term memory retention and retrieval. Since both statements accurately describe fundamental principles of how human memory functions and can be improved, they are both considered correct.

41. (A) P-4, Q-2, R-1, S-3
Semantic memory involves general facts, like the freezing point of water. Episodic memory relates to personal events, such as a birthday party. Procedural memory involves motor skills like riding a bicycle. Iconic memory is the brief visual sensory store, exemplified by a lightning afterimage. Matching these examples to their corresponding memory types results in the correct sequence of the codes.

42. (A) It is a major cause of forgetting in the decay theory.
Proactive interference is a component of interference theory, not decay theory. Decay theory suggests that memories fade simply due to the passage of time and disuse of the memory trace. Proactive interference specifically occurs when earlier learning disrupts the recall of more recent information. Examples like calling a current partner by an ex's name illustrate this interference effect accurately.

43. (D) Retrieval
Retrieval is the cognitive process of locating and recovering information from the memory system so that it can be used in the present. It is the final stage in the memory sequence, following encoding and storage. Success in retrieval depends on how well the information was initially organized and the availability of effective cues that help trigger the access to stored data.

44. (B) Massed practice without breaks
Massed practice, commonly known as cramming, is generally ineffective for long-term memory compared to distributed practice, which involves spreading study sessions over time. Mnemonics, rehearsal, and organization are all proven methods for enhancing memory retention and retrieval. Because massed practice leads to faster forgetting and less deep processing, it is not considered a valid method for long-term memory improvement.

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27. (D) Both statements are incorrect.
Proactive interference occurs when old learning interferes with the recall of new information. Retroactive interference occurs when new learning interferes with the recall of old information. The provided statements swap these definitions, making both of them incorrect. Understanding the direction of interference is essential for distinguishing between these two major causes of forgetting in the long-term and short-term memory stores.

28. (A) Both A and R are true and R is the correct explanation of A.
Retrieval failure occurs when information exists in long-term memory but cannot be accessed at a specific moment. This is often caused by the absence of effective retrieval cues that match the context of encoding. The "tip-of-the-tongue" phenomenon is a common example. Since the lack of cues explains why retrieval fails even when data is present, both statements are true.

29. (C) Episodic Memory — Explicit Memory
Explicit memory, or declarative memory, includes both episodic memory for personal life events and semantic memory for general facts. These are memories that can be consciously recalled and described. In contrast, procedural memory and conditioned responses are types of implicit memory, which operate unconsciously. Therefore, the pair matching episodic memory with explicit memory is the only correct association provided.

30. (D) Encoding Specificity Principle
The encoding specificity principle states that the effectiveness of retrieval is highly dependent on the similarity between the context at the time of encoding and the context at the time of retrieval. When cues present during learning are also available during recall, the likelihood of successful retrieval increases significantly. This principle explains phenomena such as state-dependent memory and context-dependent memory.

31. (A) P-2, Q-1, R-4, S-3
Decay theory suggests memory traces fade over time. Displacement occurs when new information pushes out old items in the limited short-term store. Interference involves competing information hindering retrieval, while repression is the motivated forgetting of traumatic events. Matching these causes to their descriptions results in the specific code, representing the various ways information can be lost or made inaccessible.

32. (B) It has a very limited capacity, holding only 2-3 items.
Sensory memory actually has a very large capacity, as it briefly holds all the sensory input from the environment. Its primary limitation is duration, not capacity. It is indeed the first stage of the multi-store model, and iconic memory is one of its forms. Because it holds a vast amount of data for a very short time, the capacity statement is incorrect.

33. (B) Recall
Writing an essay requires recall, which is the ability to retrieve information from memory without any external cues or options being provided. Unlike recognition, where the answer is visible among distractors, recall necessitates the active reconstruction of stored knowledge. This is a more challenging cognitive task because the individual must generate the information entirely from their own long-term memory store.

34. (A) Anterograde Amnesia — Forgetting one's childhood only
Anterograde amnesia is specifically the inability to form new long-term memories after a brain injury or trauma. It does not involve forgetting childhood events, which would be a form of retrograde amnesia. The other descriptions correctly identify anterograde amnesia as a failure to create new memories and retrograde amnesia as the loss of memories for events occurring before the trauma.

35. (A) I and II only
Hermann Ebbinghaus used nonsense syllables to study memory without the influence of prior meaning. His research showed that memory loss is most rapid immediately after learning. However, Statement III is incorrect because overlearning—practicing beyond initial mastery—has been shown to significantly reduce the rate of forgetting and improve long-term retention. Therefore, only the first two statements are factually accurate.

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causes of forgetting than the mere physical disintegration of traces.

54. (B) Sensory memory → Short-term memory → Long-term memory
According to the Atkinson-Shiffrin model, information flows through three sequential stages. It first enters sensory memory, where it is held very briefly. If the individual pays attention, the data moves into short-term memory. Through rehearsal and processing, it can then be transferred into long-term memory for permanent storage. This linear sequence represents the standard path of information processing in this model.

55. (D) Chunking
Chunking is a strategy that involves organizing smaller, individual units of information into larger, more meaningful groups. By treating the letters "U", "P", "P", "S", and "C" as the single unit "UPPSC", the individual reduces the cognitive load on short-term memory. This allows more information to be held and processed effectively by leveraging familiar patterns or acronyms during the encoding stage.

56. (A) The maintenance of encoded information over time
Storage is the second stage of the memory process and involves the maintenance of encoded information within the brain over a period of time. This stage ensures that information is preserved so it can be accessed later. The duration and capacity of storage vary depending on whether the information is held in sensory, short-term, or long-term memory stores within the cognitive system.

57. (C) It allows for a "playback" of auditory stimuli for a few seconds.
Echoic memory is the auditory sensory store that holds sound information for a brief period, typically lasting between three to four seconds. This duration is longer than that of iconic memory, allowing humans to process and understand spoken language by briefly retaining the sound of words. It functions like a mental playback, enabling the brain to interpret auditory sequences effectively after they end.

58. (A) Repression
Repression is a type of motivated forgetting where traumatic or highly distressing memories are pushed out of conscious awareness into the unconscious mind. Proposed by Sigmund Freud, this mechanism serves as a psychological defense to protect the individual from anxiety associated with painful past events. While the memory may still exist, it is made inaccessible to conscious retrieval until triggered or addressed.

59. (D) Procedural Memory — Skills like typing or driving
Procedural memory is a type of implicit memory that involves learning and performing motor skills, habits, and tasks. It is typically expressed through action rather than conscious verbalization. The other pairs are incorrect because semantic memory involves general facts rather than personal experiences, implicit memory is not conscious, and iconic memory is visual rather than auditory, making the procedural memory pair correct.

60. (B) The inability to form new long-term memories after a brain injury.
Anterograde amnesia is a condition characterized by the inability to create new memories after the occurrence of a brain injury or trauma. While individuals with this condition can often recall events from their past and maintain short-term information, they cannot successfully transfer new data into long-term storage. This makes it impossible for them to remember recent experiences or learn new factual information.

61. (C) It occurs because the memory has been completely erased from the brain.
Retrieval failure occurs when information is stored in long-term memory but cannot be accessed at a given time, often due to a lack of effective cues. This is different from the memory being erased or destroyed. The "tip-of-the-tongue" phenomenon is a classic example of this access problem. Because the information is still technically present in the brain, the erasure statement is incorrect.

62. (A) Statement I is correct, but Statement II is incorrect.
The Working Memory Model identifies the central executive as the component responsible

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45. (A) I and II only
Interference theory posits that forgetting occurs because memories compete with each other. Proactive interference involves old memories disrupting new ones, while retroactive interference involves new memories disrupting old ones. Statement III is incorrect because interference is actually more likely to occur when the two sets of information are very similar, as they are more easily confused during the retrieval process.

46. (D) The length of time information can be held in a memory store.
In memory research, duration refers specifically to the temporal span for which a memory store can retain information. Sensory memory has a very short duration of seconds, short-term memory lasts for about twenty to thirty seconds without rehearsal, and long-term memory has a duration that can potentially last for a lifetime. This is distinct from capacity, which refers to storage volume.

47. (A) Retrograde Amnesia — Loss of memories prior to trauma
Retrograde amnesia is correctly defined as the loss of access to memories that were formed before a brain injury or trauma occurred. Proactive interference involves old info hindering new info, and retroactive interference involves new info hindering old info. Anterograde amnesia is the inability to form new memories. Therefore, only the pair regarding retrograde amnesia is correctly matched with its definition.

48. (A) Both A and R are true and R is the correct explanation of A.
The Atkinson-Shiffrin model emphasizes that short-term memory has a limited duration and capacity. If information is not actively rehearsed, it is lost through either decay, where the trace fades, or displacement, where new incoming data pushes out existing items. Since these mechanisms explain why unrehearsed information leaves the short-term store, both the assertion and the reason are true and connected.

49. (B) Recalling a happy event more easily when you are currently happy.
State-dependent memory refers to the phenomenon where retrieval is most effective when an individual is in the same internal state as they were during encoding. This includes emotional states like happiness or sadness, as well as physiological states. Recalling a happy memory while currently in a positive mood is a perfect example of how internal cues can facilitate the recovery of information.

50. (A) Recognition
Identifying a suspect from a lineup is an example of recognition because the individual must select the correct item from a presented set of options. The suspect's face serves as an external cue that is matched against stored memories. This task is different from recall, where the person would have to describe the suspect's appearance from memory without any visual aids present.

51. (A) P-2, Q-1, R-4, S-3
George Miller identified the capacity of short-term memory as seven items. Chunking involves grouping pieces of data into meaningful units. Mnemonics are strategies used to enhance memory, while the forgetting curve graphically represents how information is lost over time. Matching these terms to their descriptions accurately follows the established psychological principles and leads to the correct identification of the code.

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52. (A) Statement I is correct, but Statement II is incorrect.
Declarative memory, also known as explicit memory, is indeed composed of episodic and semantic memory. However, procedural memory—which involves motor skills and habits—is a type of implicit memory, not explicit memory. Implicit memories are typically non-declarative and do not require conscious effort to recall. Thus, the first statement is correct, while the second statement is an incorrect classification.

53. (C) It is the most widely accepted explanation for forgetting in LTM.
Decay theory suggests that memory traces fade simply due to the passage of time and disuse. While it is a common explanation for forgetting in sensory and short-term memory, it is not the most accepted theory for long-term memory. In long-term stores, interference and retrieval failure are generally considered more significant

18. (D) A is false but R is true.
Elaborative rehearsal is actually more effective than maintenance rehearsal for long-term retention because it involves creating meaningful connections to existing knowledge. Maintenance rehearsal involves simple repetition, which is less likely to result in deep processing. While the reason correctly defines elaborative rehearsal, the assertion is false because maintenance rehearsal is generally considered a shallow and less effective strategy.

19. (C) It proposes three distinct stages: Sensory, Short-term, and Long-term.
The Atkinson-Shiffrin model, also known as the multi-store model, describes memory as consisting of three distinct structural stages. It suggests that information moves from the sensory register to short-term memory through attention, and then to long-term memory through rehearsal. This model emphasizes the flow of information between these separate stores, each having different capacities and durations for holding data.

20. (D) Information must pass through a fixed sequence of stores.
The levels of processing model focuses on the depth of mental processing rather than the movement of information through fixed structural stores. It suggests that deep, semantic encoding leads to better memory than shallow, structural encoding. The idea of a fixed sequence of stores is a characteristic of the Atkinson-Shiffrin model, making it an incorrect description of this specific framework.

21. (A) P-2, Q-4, R-1, S-3
Encoding is the process of converting stimuli into a usable code, while storage involves maintaining that information over time. Retrieval is the act of recovering information from memory stores when it is needed. Consolidation refers to the physiological process of stabilizing a memory trace after initial acquisition. Matching these definitions to the terms correctly identifies the required sequence and codes.

22. (B) Chunking
Chunking is the process of grouping small, individual bits of information into larger, meaningful units. By organizing a ten-digit number into three distinct groups, an individual reduces the total number of items to be remembered, fitting them within the limited capacity of short-term memory. This strategy is commonly used to remember phone numbers, social security digits, and other long sequences.

23. (D) Recognition
Recognition is a retrieval task that involves identifying previously learned information when it is presented among several options. This process is generally easier than recall because the information is physically present to serve as a cue. Common examples include multiple-choice exams or picking a face out of a lineup, where the goal is to match current input with stored memories.

24. (A) The Ebbinghaus curve shows that forgetting is slowest immediately after learning.
Hermann Ebbinghaus found that forgetting is actually most rapid immediately after learning, with the rate of loss slowing down as more time passes. His forgetting curve illustrates this sharp initial decline in retention. The other statements regarding encoding failure, interference as a cause of forgetting in long-term memory, and the existence of motivated forgetting through repression are all factually correct.

25. (D) I, II, and III
The Working Memory Model was introduced by Baddeley and Hitch to describe a more complex system than simple short-term storage. It incorporates the central executive, phonological loop, and visuo-spatial sketchpad to manage information during cognitive tasks. This model effectively replaced the idea of a unitary store by explaining how different types of data are actively manipulated and processed simultaneously.

26. (A) The inability to retrieve or access previously stored information
In psychology, forgetting is defined as the inability to retrieve or access information that was previously encoded and stored in memory. It does not necessarily mean the information has been permanently deleted from the brain; rather, it often involves a failure in the retrieval process. This can occur due to decay, interference, or the lack of effective cues needed for recall.

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for managing and directing the flow of information. However, the phonological loop is specifically dedicated to handling auditory and verbal information, not visual or spatial data. Visual and spatial information is processed by the visuo-spatial sketchpad. Therefore, the first statement is correct while the second statement is factually inaccurate.

63. (A) Retroactive interference
Retroactive interference occurs when new information, such as a recently learned phone number, interferes with the ability to recall older information, like an old phone number. The new learning essentially works backward to disrupt the retrieval of established memories. This is a common cause of forgetting in long-term memory and is distinct from proactive interference, where old information disrupts the learning of new data.

64. (C) Sensory → Short-term → Long-term
In the stages of memory, sensory memory has the shortest duration, lasting only a few seconds or less. Short-term memory has a moderate duration, typically holding information for twenty to thirty seconds without active rehearsal. Long-term memory has the longest duration, capable of maintaining information for years or even a lifetime. This sequence correctly orders the stages from the shortest to longest temporal span.

65. (B) Displacement
Displacement is a theory of forgetting specifically associated with short-term memory. Since short-term memory has a limited capacity of approximately seven items, new incoming information must push out or "displace" existing items once the store is full. This mechanism explains why we often forget the beginning of a long list when we are forced to focus on the items presented at the end.

66. (A) Ebbinghaus — Chunking
Hermann Ebbinghaus is known for his research on the forgetting curve and the savings method, not chunking. Chunking is a concept most famously associated with George Miller. The other pairings correctly match Atkinson and Shiffrin with the multi-store model, Craik and Lockhart with the levels of processing framework, and Alan Baddeley with the working memory model, leaving the Ebbinghaus pair as incorrect.

67. (C) Sensory register
The Working Memory Model, proposed by Baddeley and Hitch, consists of the central executive, the phonological loop, the visuo-spatial sketchpad, and later, the episodic buffer. The sensory register is a component of the Atkinson-Shiffrin multi-store model, not the working memory model. Working memory focuses on the active manipulation of information rather than the initial, passive intake of raw sensory stimuli.

68. (D) Elaborative rehearsal
Elaborative rehearsal is a memory technique that involves thinking about the meaning of information and connecting it to existing knowledge or personal experiences. By relating script lines to their own life, the actor engages in deep processing, which creates stronger and more durable memory traces in long-term storage. This is much more effective for complex learning than simple repetition or maintenance rehearsal.

69. (C) The inability to recall events that occurred before a trauma.
Retrograde amnesia refers to the loss of memories for events that happened prior to a brain injury or traumatic incident. Individuals with this condition may struggle to remember their past, personal identity, or established facts learned before the trauma. It is the opposite of anterograde amnesia, which affects the ability to form new memories after the injury has already taken place.

70. (B) It is effectively unlimited.
Long-term memory is characterized by a capacity that is considered effectively unlimited, meaning there is no known upper limit to the amount of information it can store over a lifetime. Unlike sensory or short-term memory, which have strict capacity constraints, long-term memory can continue to accommodate new knowledge, skills, and experiences indefinitely through the creation of new neural connections and associations.

71. (C) Both statements are correct.
Explicit memory is indeed referred to as declarative memory because it involves facts and events that can be consciously recalled

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and declared. Similarly, implicit memory is known as non-declarative memory because it consists of skills and conditioned responses that are expressed through performance without conscious awareness. Since both statements accurately provide the alternative names for these memory systems, they are both correct.

72. (A) Echoic store
Within the sensory memory stage, auditory information is specifically held in the echoic store. This store allows for a brief retention of sound stimuli, lasting approximately three to four seconds. This temporal window is essential for the brain to process and interpret continuous auditory signals, such as speech or music, ensuring that the listener can understand sentences as cohesive units of meaning.

73. (C) It is tied to specific times and places of learning.
Semantic memory stores general facts, language, and world knowledge that are independent of the specific context in which they were learned. This lack of connection to a particular time or place is what distinguishes semantic memory from episodic memory, which is deeply tied to personal experiences. Therefore, the statement claiming semantic memory is tied to specific times and places is factually incorrect.

74. (A) An unconscious or conscious attempt to push unpleasant memories out of awareness
Motivated forgetting involves the intentional or unintentional act of excluding memories from conscious awareness, typically because they are painful, embarrassing, or traumatic. This includes mechanisms like repression and suppression. It is a psychological strategy used to manage emotional distress by making difficult memories inaccessible. This process is driven by the individual's psychological needs rather than by simple decay or interference.

75. (D) Levels of processing model
The levels of processing model, proposed by Craik and Lockhart, suggests that the depth of mental processing determines how well information is remembered. Focusing on the meaning of a word is considered deep semantic processing, which results in much better retention than focusing on shallow physical characteristics like font. This research finding directly supports the theory that processing depth is key to memory.

76. (B) Miller — 7 ± 2 items in STM
George Miller is correctly matched with his famous finding that the human short-term memory capacity is approximately seven items, plus or minus two. Craik and Lockhart are associated with levels of processing, while Baddeley is linked to the working memory model. Ebbinghaus, rather than Atkinson, is the researcher who developed the forgetting curve. Thus, the Miller pair is the correct one.

77. (C) Anterograde
Proactive and retroactive interference are the two primary types of interference that cause forgetting by having different memories compete with each other. Associative interference is also a recognized concept. However, anterograde refers to a type of amnesia—the inability to form new memories—rather than a type of interference. Therefore, anterograde does not fit within the categories of memory interference mechanisms.

78. (D) Encoding and Retrieval contexts
The encoding specificity principle focuses on how the context during the initial encoding of information affects later retrieval. It posits that memory is most successful when the cues available during retrieval match the cues that were present during the encoding phase. This principle highlights the critical relationship between the environment or internal state during learning and the subsequent ability to recover that data.

79. (A) Statement I is correct, but Statement II is incorrect.
Episodic memory is often described as allowing "mental time travel" because it enables individuals to revisit personal past events. However, semantic memory is a type of explicit or declarative memory, not implicit memory. Implicit memory involves skills and habits that are performed without conscious thought. Thus, the first statement is correct while the second statement incorrectly classifies semantic memory.

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80. (C) 7 ± 2 items
George Miller's research in the 1950s led to the conclusion that the capacity of human short-term memory is limited to about seven items, with a variation of plus or minus two. This "magic number" represents the number of independent units or chunks of information that most people can keep in their immediate awareness before the information begins to decay or be displaced.

81. (B) Massed practice (cramming) is better than distributed practice for LTM.
Research consistently shows that distributed practice, which involves spreading study sessions over time, is far superior to massed practice for long-term retention. Cramming may lead to temporary recall but results in rapid forgetting. Other statements about mnemonics, the effectiveness of elaborative rehearsal, and the benefits of self-referencing are all scientifically supported methods for improving memory, making the cramming statement incorrect.

82. (A) Recognition is generally easier than recall.
Recognition is usually easier than recall because it involves identifying information from a set of provided options, which act as powerful external cues. Recall requires the brain to reconstruct the information entirely from within. Retrieval is the process of getting information out of memory, not putting it in, and it occurs from both short-term and long-term stores, though it is never perfect.

83. (C) Procedural — Knowledge of Rules
Procedural memory involves the mastery of motor skills, habits, and actions, such as knowing how to ride a bike. It is typically expressed through performance rather than the verbal knowledge of rules. Knowledge of rules and facts is generally classified under semantic memory. The other pairs correctly match semantic with facts, episodic with history, and implicit with skill performance, making the procedural pair incorrect.

84. (D) Organizing small pieces of information into larger, meaningful units.
Chunking is the psychological process of taking individual pieces of information and grouping them into larger, coherent, and meaningful units. This technique effectively expands the functional capacity of short-term memory by reducing the total number of items the brain needs to track. It relies on the individual's ability to find patterns or associations within the data, such as acronyms or dates.

85. (C) A process of encoding, storage, and retrieval.
The nature of memory is understood in psychology as a dynamic cognitive system consisting of three essential processes. Encoding is the initial processing of information, storage is the maintenance of that information over time, and retrieval is the recovery of the information for use. This framework explains how experiences are transformed into lasting knowledge that can influence future behavior and thought processes.

86. (B) Retrograde amnesia
Retrograde amnesia is the inability to recall events, facts, or personal information that were learned before a traumatic event or brain injury occurred. In this scenario, the person's failure to remember their own name or their previous residence indicates a loss of pre-existing long-term memories. This condition specifically targets the memory of the past while often leaving the ability to learn new things intact.

87. (D) Attention is the key to moving info from Sensory to STM.
In the Atkinson-Shiffrin model, attention is the critical filter that determines which information from the sensory register moves into short-term memory. Most sensory information is lost almost immediately; only the stimuli that are attended to are processed further. This model establishes a clear hierarchical structure where attention and rehearsal are the primary mechanisms for the movement of data between stages.

88. (A) Working Memory
The three-stage model of memory, also known as the multi-store model, specifically includes sensory memory, short-term memory, and long-term memory. Working memory is a more modern concept that describes the active processing of information within the short-term store, but it is not one of the original three structural stages of the Atkinson-Shiffrin model, which focused on passive storage stores.

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89. (B) Statement I is incorrect, but Statement II is correct.
Retroactive interference occurs when new information blocks the recall of old information, not the other way around. Proactive interference correctly describes the situation where old information disrupts the learning or recall of new information. Therefore, Statement I is factually incorrect as it provides the wrong definition, while Statement II accurately defines proactive interference. This distinction is vital for understanding forgetting.

90. (A) Ebbinghaus — Savings method and Forgetting Curve
Hermann Ebbinghaus is a pioneering figure in memory research who developed the savings method to measure retention and identified the forgetting curve, which shows how information is lost over time. Mnemonics are aids for memory, not causes of forgetting. Interference causes the loss of memories, not their growth. Displacement is a mechanism that limits capacity, making the Ebbinghaus pairing the only correct one.

91. (D) It is a conscious process of trying to forget.
Repression is defined as an unconscious defense mechanism that pushes distressing or traumatic memories out of awareness. It is not a conscious effort; consciously trying to forget something is known as suppression. Proposed by Freud, repression happens automatically to protect the ego from anxiety. Therefore, the statement claiming it is a conscious process is an incorrect description of this specific psychological phenomenon.

92. (B) Memory based on the internal state (like mood) of the person.
State-dependent memory refers to the improved recall of information when an individual is in the same internal physiological or emotional state as they were during the initial encoding. This can include moods like happiness or sadness, as well as states induced by substances. These internal conditions act as retrieval cues that facilitate the recovery of memories stored under the same conditions.

93. (C) A mnemonic
Using an acronym like "VIBGYOR" to remember the colors of the rainbow is a classic example of a mnemonic device. Mnemonics are cognitive strategies or tools used to improve memory by creating easy-to-remember associations or structures. This specific type of mnemonic helps organize a list of items into a single word, making the information more accessible for later retrieval from long-term memory.

94. (D) Echoic
Among the different types of sensory memory, echoic memory has the longest duration, typically lasting between three to four seconds. In contrast, iconic memory, which is visual sensory memory, lasts for less than one second. This longer duration for auditory information is essential for human communication, as it allows the brain to hold onto sounds long enough to integrate them into meaningful speech.

95. (A) Memory for how to perform specific actions or skills
Procedural memory is a form of implicit memory that stores information about how to perform various motor skills and physical tasks. Examples include riding a bicycle, typing on a keyboard, or swimming. These memories are typically acquired through practice and are expressed through performance. Unlike semantic or episodic memory, procedural knowledge is often difficult to describe in words and operates unconsciously.

96. (B) It requires the person to produce information from memory without cues.
Recall is a retrieval task that requires an individual to reproduce information purely from memory without the help of external options or cues. This is generally more difficult than recognition because there is no external stimulus to match against stored data. It is commonly tested through open-ended questions or essay exams where the respondent must generate the correct information entirely on their own.

97. (A) Statement I is correct, but Statement II is incorrect.
Information in short-term memory is known to last for approximately twenty to thirty seconds unless it is actively rehearsed. However, long-term memory does not have a fixed limit in terms of gigabytes; its capacity is considered effectively unlimited in psychological terms. While the

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first statement accurately describes the duration of short-term memory, the second statement incorrectly applies a digital storage limit.

98. (A) Cognitive Enhancement
Decay, interference, and retrieval failure are all established psychological causes of forgetting. Decay involves the fading of memory traces over time, interference occurs when memories compete with one another, and retrieval failure happens when cues are missing. Cognitive enhancement, however, refers to the improvement of mental functions rather than their failure, making it an incorrect choice for a cause of forgetting.

99. (C) Retrieval — Losing information
Retrieval is the process of successfully recovering or accessing information from memory stores, not losing it. Forgetting or decay would be the appropriate terms for losing information. Encoding is correctly paired with processing, storage is correctly matched with maintenance, and mnemonics are indeed memory aids. Therefore, the pair matching retrieval with the loss of information is factually incorrect and conceptually backwards.

100. (D) A system for receiving, encoding, storing, and retrieving information.
The nature of memory is best described as a complex cognitive system designed to process information through several distinct stages. It begins with the reception and encoding of stimuli, continues with the storage of that information over various durations, and concludes with the retrieval of that data for future use. This systematic approach allows humans to learn from the past and function in the present.

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CHAPTER 19
Intelligence and Psychological Assessment

1. Who is considered the father of intelligence testing and first introduced the concept of "mental age"?
(A) David Wechsler
(B) Alfred Binet
(C) Charles Spearman
(D) Lewis Terman

2. Read the following assertion and reason and select the correct option.
Assertion (A): Intelligence is a global capacity that allows an individual to act purposefully and think rationally.
Reason (R): Intelligence is an innate, fixed trait that does not change regardless of environmental factors.
(A) Both A and R are true and R is the correct explanation of A.
(B) Both A and R are true but R is not the correct explanation of A.
(C) A is true but R is false.
(D) A is false but R is true.

3. Which of the following statements regarding Alfred Binet's concept of intelligence is correct?
(A) Intelligence comprises various distinct and independent mental faculties.
(B) Intelligence is determined strictly by physical reaction time to stimuli.
(C) Intelligence is a single, unified capacity for judgment and reasoning.
(D) Intelligence cannot be effectively measured using standard verbal tasks.

4. Match the theory in List I with the proponent in List II and select the correct answer using the codes given below:
List I: (Theory)
P. Two-factor theory
Q. Primary Mental Abilities
R. Triarchic theory
S. Multiple Intelligences
List II: (Proponent)
1. Howard Gardner
2. Robert Sternberg
3. Charles Spearman
4. Louis Thurstone
(A) P-3, Q-4, R-2, S-1
(B) P-4, Q-3, R-1, S-2
(C) P-3, Q-1, R-4, S-2
(D) P-1, Q-2, R-3, S-4

5. Which term refers to the level of mental development relative to the age at which average children achieve that level?
(A) Chronological age
(B) Intelligence quotient
(C) Mental age
(D) Developmental ratio

6. Consider the following statements regarding the Intelligence Quotient (IQ) formula:
I. It was originally suggested by William Stern.
II. It is calculated by dividing Chronological Age by Mental Age and multiplying by 100.
III. Terman popularized its use in the Stanford-Binet scale.
Which of the statements given above are correct?
(A) I and II only
(B) II and III only
(C) I and III only
(D) I, II, and III

7. Identify the INCORRECT statement regarding the classification of IQ levels.
(A) An IQ of 100 is considered average.
(B) Individuals with an IQ below 70 are typically classified as intellectually disabled.
(C) An IQ above 130 is often associated with intellectual giftedness.
(D) The "Superior" category generally ranges from 90 to 110.

8. Arrange the following IQ classifications in descending order of their score ranges:
1. Average
2. Gifted

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3. Borderline
4. Superior

(A) 2, 4, 1, 3
(B) 4, 2, 3, 1
(C) 2, 1, 4, 3
(D) 1, 2, 4, 3

9. In Spearman's theory, what does the "s-factor" represent?
(A) Social intelligence that is common across all human beings
(B) Sequential processing speed for completing complex puzzles
(C) Specific abilities unique to particular tasks
(D) Stable emotional intelligence used in interpersonal settings

10. Read the following assertion and reason and select the correct option.
Assertion (A): Thurstone's theory of Primary Mental Abilities (PMA) challenged Spearman's concept of a general factor (g).
Reason (R): Thurstone identified seven independent factors that constitute intelligence rather than a single global factor.
(A) Both A and R are true and R is the correct explanation of A.
(B) Both A and R are true but R is not the correct explanation of A.
(C) A is true but R is false.
(D) A is false but R is true.

11. According to Guilford's Structure of Intellect model, which dimension refers to the basic types of information processed?
(A) Operations
(B) Products
(C) Skills
(D) Contents

12. Which of the following is NOT a component of the "Operations" dimension in Guilford's Structure of Intellect model?
(A) Memory
(B) Semantic units
(C) Divergent thinking
(D) Cognition

13. Match the intelligence types in List I with the characteristics in List II and select the correct answer:
List I: (Intelligence Type)
P. Fluid Intelligence
Q. Crystallized Intelligence
R. Investment Theory
S. Cultural influence
List II: (Characteristics)
1. Acquired knowledge and skills
2. Biological and neurological capacity
3. Fluid intelligence leads to crystallized
4. High impact on crystallized intelligence

(A) P-2, Q-1, R-3, S-4
(B) P-1, Q-2, R-4, S-3
(C) P-2, Q-4, R-1, S-3
(D) P-3, Q-1, R-2, S-4

14. Read the following statements and select the correct option.
Statement I: Fluid intelligence remains stable or increases throughout the entire lifespan.
Statement II: Crystallized intelligence is highly dependent on formal education and cultural exposure.
(A) Statement I is correct but Statement II is incorrect.
(B) Statement I is incorrect but Statement II is correct.
(C) Both statements are correct.
(D) Both statements are incorrect.

15. In his widely recognized model, Howard Gardner identified how many distinct types of intelligence?
(A) 3
(B) 5
(C) 8
(D) 120

16. Consider the following types of intelligence identified by Howard Gardner:
I. Intrapersonal Intelligence
II. Logical-Mathematical Intelligence
III. Creative Intelligence
Which of these are included in Gardner's theory of Multiple Intelligences?
(A) I and II only
(B) II and III only
(C) I and III only
(D) I, II, and III

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17. Which sub-theory in Sternberg's Triarchic theory involves the ability to adapt to, shape, and select everyday environments?
(A) Componential
(B) Contextual
(C) Experiential
(D) Creative

18. In Sternberg's Triarchic theory, "Experiential" intelligence is best described as:
(A) Ability to deal with novel situations and automate processing
(B) Academic problem solving involving abstract symbolic logic
(C) Practical street smarts used to navigate daily environments
(D) Logical analysis of data within formal research structures

19. Read the following assertion and reason and select the correct option.
Assertion (A): Emotional Intelligence (EI) is often a better predictor of success in life than IQ.
Reason (R): EI involves the ability to monitor one's own and others' feelings and emotions.
(A) Both A and R are true and R is the correct explanation of A.
(B) Both A and R are true but R is not the correct explanation of A.
(C) A is true but R is false.
(D) A is false but R is true.

20. Which of the following is an INCORRECT pair regarding Howard Gardner's intelligences?
(A) Bodily-Kinesthetic — Dancers and Surgeons
(B) Spatial — Architects and Pilots
(C) Linguistic — Poets and Lawyers
(D) Musical — Accountants and Engineers

21. The debate concerning the relative influence of genetics and environment on intelligence is known as:
(A) Growth vs. Development
(B) Stability vs. Change
(C) Nature vs. Nurture
(D) Heredity vs. Maturation

22. Research on the "Flynn Effect" suggests that:
(A) Intelligence scores have been steadily declining over generations.
(B) Intelligence scores have been steadily increasing over generations.
(C) Intelligence is purely determined by the mother's genetics.
(D) Cultural differences in intelligence have disappeared.

23. Which of the following generally shows the most stability in intelligence scores over the adult lifespan?
(A) Processing speed
(B) Short-term memory
(C) Novel problem-solving
(D) Verbal comprehension

24. Which of the following is a correct statement regarding gender differences in intelligence?
(A) Women generally perform better on tasks involving verbal fluency.
(B) Men have significantly higher average general intelligence (g) than women.
(C) Men are consistently better at all mathematical tasks than women.
(D) Gender differences in intelligence are purely biological and unaffected by culture.

25. Match the concept in List I with the definition in List II and select the correct answer:
List I: (Concept)
P. Reliability
Q. Validity
R. Norms
S. Standardization
List II: (Definition)
1. Consistency of test scores
2. Degree to which a test measures what it claims
3. Standard of comparison for test results
4. Uniformity of procedure in administration
(A) P-1, Q-2, R-3, S-4
(B) P-2, Q-1, R-4, S-3
(C) P-1, Q-3, R-2, S-4
(D) P-4, Q-2, R-3, S-1

26. Consider the following statements regarding psychological tests:
I. A test must be reliable to be valid.
II. A test can be reliable without being valid.
III. Validity refers to the consistency of measurement.
Which of the statements given above are correct?
(A) I and II only

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(B) II and III only
(C) I and III only
(D) I, II, and III

27. What is the primary purpose of "Norms" in psychological testing?
(A) To ensure the test is sufficiently difficult for the participants
(B) To reduce the overall time required for completing the exam
(C) To eliminate the ongoing need for detailed reliability checks
(D) To provide a frame of reference for interpreting individual scores

28. Which type of reliability is measured by administering the same test to the same group at two different times?
(A) Split-half reliability
(B) Test-retest reliability
(C) Inter-rater reliability
(D) Parallel-forms reliability

29. Which of the following is an example of an individual intelligence test?
(A) The Army Alpha Group Intelligence Test
(B) Raven's Progressive Matrices Pattern Test
(C) Wechsler Adult Intelligence Scale (WAIS)
(D) The Cattell Culture Fair Intelligence Test

30. Read the following assertion and reason and select the correct option.
Assertion (A): Performance tests are better suited for illiterate individuals or those from different linguistic backgrounds.
Reason (R): Performance tests minimize the use of language and require the manipulation of objects.
(A) Both A and R are true and R is the correct explanation of A.
(B) Both A and R are true but R is not the correct explanation of A.
(C) A is true but R is false.
(D) A is false but R is true.

31. Which of the following is a characteristic of "Group Tests" in psychological assessment?
(A) They can be administered to many people simultaneously.
(B) They allow for detailed observation of the subject's behavior.
(C) They are highly time-consuming for the examiner.
(D) They require highly specialized rapport-building skills.

32. Arrange the steps of psychological test construction in the correct sequence:
1. Reliability and Validity testing
2. Item analysis
3. Planning and item writing
4. Developing norms
(A) 3, 2, 1, 4
(B) 1, 2, 3, 4
(C) 3, 1, 2, 4
(D) 2, 3, 1, 4

33. Which of the following is a key feature of "Projective Tests"?
(A) They use highly structured, objective, and forced-choice questions
(B) They utilize ambiguous stimuli to reveal unconscious motives
(C) They have clearly defined and objectively scored correct answers
(D) They are primarily used to measure quantitative mathematical aptitude

34. The Rorschach test consists of how many inkblot cards?
(A) 5
(B) 10
(C) 15
(D) 20

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35. Match the test in List I with the category in List II and select the correct answer:
List I: (Test)
P. TAT
Q. MMPI
R. Stanford-Binet
S. Raven's Progressive Matrices
List II: (Category)
1. Personality Inventory
2. Projective Test
3. Non-verbal Intelligence Test
4. Individual Intelligence Test
(A) P-2, Q-1, R-4, S-3
(B) P-1, Q-2, R-3, S-4
(C) P-2, Q-3, R-1, S-4
(D) P-4, Q-1, R-2, S-3

77. Which of the following is NOT one of Thurstone's Primary Mental Abilities?
(A) Verbal Comprehension
(B) Numerical Ability
(C) Musical Ability
(D) Spatial Visualization

78. Which concept refers to the stability of a test over time and across different observers?
(A) Validity
(B) Norms
(C) Scaling
(D) Reliability

79. Identify the correct pair regarding Sternberg's Triarchic Theory:
(A) Experiential — Creative Intelligence
(B) Componential — Practical Intelligence
(C) Contextual — Analytical Intelligence
(D) Componential — Emotional Intelligence

80. Read the following assertion and reason and select the correct option.
Assertion (A): Cultural bias in intelligence testing is a significant concern for psychologists.
Reason (R): Most traditional intelligence tests are based on Western middle-class values and language.
(A) Both A and R are true and R is the correct explanation of A.
(B) Both A and R are true but R is not the correct explanation of A.
(C) A is true but R is false.
(D) A is false but R is true.

81. Which of the following is an example of a performance sub-test in the Wechsler scales?
(A) Vocabulary
(B) Block Design
(C) Arithmetic
(D) Information

82. In the IQ classification, "Genius" is usually associated with an IQ above:
(A) 100
(B) 110
(C) 120
(D) 140

83. Which psychologist emphasized that intelligence is simply "what the intelligence tests measure"?
(A) Jean Piaget
(B) Albert Bandura
(C) E.G. Boring
(D) B.F. Skinner

84. Identify the INCORRECT pair regarding the Spearman Two-factor theory:
(A) G-factor — A source of general mental energy for all tasks
(B) S-factor — An acquired specific skill needed for one task
(C) S-factor — A trait that varies from task to task for individuals
(D) G-factor — Varies from task to task within an individual

85. Which of the following is a negative aspect of "Group Intelligence Tests"?
(A) They are highly cost-effective for large-scale implementations
(B) They can be scored objectively and relatively quickly by computer
(C) They lack the opportunity to establish rapport with the test-taker.
(D) They allow for efficient large-scale data collection and analysis

86. Consider the following about the MMPI:
I. It is a self-report inventory.
II. It consists of over 500 statements.
III. It is used to assess intelligence.
Which of the statements given above are correct?
(A) I and II only
(B) II and III only
(C) I and III only
(D) I, II, and III

87. Which criteria of a good psychological test refers to the "standardized sample" used to create the comparison group?
(A) Reliability
(B) Validity
(C) Objectivity
(D) Norms

88. Which type of intelligence in Gardner's model would a botanist or a hunter likely excel in?
(A) Naturalistic
(B) Spatial
(C) Bodily-Kinesthetic
(D) Logical-Mathematical

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(A) Social — Interpersonal behavior
(B) Fluid — Biological capacity
(C) Verbal — Linguistic processing
(D) Analytical — Componential thinking

47. Consider the following regarding the Wechsler Adult Intelligence Scale (WAIS):
I. It was developed to overcome the limitations of the Stanford-Binet for adults.
II. It uses the concept of Deviation IQ.
III. It excludes non-verbal performance tasks.
Which of the statements given above are correct?
(A) I and II only
(B) II and III only
(C) I and III only
(D) I, II, and III

48. Which factor in Spearman's theory is considered to be constant for a given individual across all tasks?
(A) s-factor
(B) g-factor
(C) e-factor
(D) p-factor

49. What type of test is Raven's Progressive Matrices?
(A) Verbal group test
(B) Non-verbal group test
(C) Individual verbal test
(D) Subjective projective test

50. In the classification of IQ, what is the range for "Dull Normal" or "Low Average"?
(A) 70-79
(B) 80-89
(C) 90-109
(D) 110-119

51. Which of the following is an example of an aptitude test?
(A) Final cumulative school examinations
(B) The Rorschach Inkblot Projective Test
(C) Scholastic Assessment Test (SAT)
(D) Wechsler Adult Intelligence Scale IV

52. The term "Mental Age" was first used in which version of the Binet-Simon scale?
(A) 1905
(B) 1911
(C) 1916
(D) 1908

53. Which of the following is a correct statement regarding "Reliability" in testing?
(A) It measures whether the test covers the whole syllabus.
(B) High reliability guarantees high validity.
(C) It refers to the repeatability of a test score.
(D) It is only necessary for personality tests.

54. Which of the following is an INCORRECT statement regarding Gardner's theory of Multiple Intelligences?
(A) Intelligences are relatively independent of each other.
(B) All individuals possess the same profile of the 8 intelligences.
(C) Brain damage can impair one intelligence while leaving others intact.
(D) Excellence in one area does not necessarily imply excellence in another.

55. Identify the correct pair for Cattell's Intelligence theory:
(A) Fluid — Culturally dependent
(B) Crystallized — Innate potential
(C) Crystallized — Decreases rapidly with age
(D) Fluid — Novel problem solving

56. Identify the INCORRECT pair regarding psychological test criteria:
(A) Standardization — Subjective scoring
(B) Reliability — Consistency over time
(C) Validity — Accuracy of measurement
(D) Norms — Comparative population data

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57. Which of the following is NOT considered a projective test?
(A) Standardized Sentence Completion Personality Test
(B) Jungian Word Association Diagnostic Technique
(C) Minnesota Multiphasic Personality Inventory (MMPI)
(D) Projective House-Tree-Person Drawing Test

58. Which of the following is the most appropriate description of "Emotional Intelligence"?
(A) Capacity to recognize, understand, and manage emotions
(B) Suppression of all emotional responses to think logically
(C) Manipulation of others' emotions for

36. The Thematic Apperception Test (TAT) requires the subject to:
(A) Interpret inkblots
(B) Solve complex geometric puzzles
(C) Answer "True" or "False" to self-descriptive statements
(D) Tell stories about ambiguous pictures

37. Which of the following personality tests is most likely to be used for clinical diagnosis of psychological disorders?
(A) TAT
(B) Rorschach
(C) MMPI
(D) Word Association Test

38. Consider the following statements about Achievement and Aptitude tests:
I. Achievement tests measure what a person has already learned.
II. Aptitude tests predict a person's future performance or potential.
III. Intelligence tests are technically a form of achievement test.
Which of the statements given above are correct?
(A) I and II only
(B) II and III only
(C) I and III only
(D) I, II, and III

39. The original Stanford-Binet scale was an adaptation of Binet's work by which psychologist?
(A) David Wechsler
(B) Francis Galton
(C) Raymond Cattell
(D) Lewis Terman

40. Which Wechsler scale is specifically designed for children aged 6 to 16?
(A) WISC
(B) WAIS
(C) WPPSI
(D) WMS

41. Read the following assertion and reason and select the correct option.
Assertion (A): Wechsler scales provide separate scores for Verbal and Performance components.
Reason (R): Wechsler believed that intelligence is a multi-faceted construct that cannot be represented by a single score alone.
(A) Both A and R are true and R is the correct explanation of A.
(B) Both A and R are true but R is not the correct explanation of A.
(C) A is true but R is false.
(D) A is false but R is true.

42. Who developed the first systematic adaptation of the Binet-Simon scale in India?
(A) C.H. Rice
(B) S.M. Mohsin
(C) J.P. Guilford
(D) V.V. Kamat

43. Which of the following is NOT an ethical requirement in psychological testing?
(A) Informed consent
(B) Confidentiality of results
(C) Proper communication of results to the examinee
(D) Labeling individuals based on a single test score

44. Match the test in List I with the Indian context or author in List II and select the correct answer:
List I: (Test)
P. Hindustani Binet Performance Point Scale
Q. Battery of Performance Tests
R. Group Test of General Mental Ability
S. Draw-a-Man Test (Indian adaptation)
List II: (Indian Context/Author)
1. S. Jalota
2. Chandra Mohan Bhatia
3. C.H. Rice
4. Pramila Phatak
(A) P-3, Q-2, R-1, S-4
(B) P-2, Q-3, R-4, S-1
(C) P-1, Q-4, R-3, S-2
(D) P-4, Q-1, R-2, S-3

45. Which term is used to describe the consistency of a test across different items within the same test?
(A) External validity
(B) Predictive validity
(C) Internal consistency
(D) Criterion reliability

46. Identifying the correct pair of Intelligence types in Sternberg's Triarchic Theory:

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67. What is the common term for intelligence that is influenced by "Nurture"?
(A) General biological intelligence
(B) Specific genetic potential
(C) Acquired environmental intelligence
(D) Innate neurological reflex

68. Identify the INCORRECT statement about the concept of Emotional Intelligence.
(A) It includes components like self-awareness and self-regulation
(B) It incorporates empathy and specialized social interaction skills
(C) It is considered crucial for effective leadership and management
(D) It is entirely determined at birth and cannot be learned.

69. Which of the following is a non-verbal test?
(A) Army Alpha
(B) Binet-Simon Scale
(C) Army Beta
(D) Jalota's Mental Ability Test

70. Read the following assertion and reason and select the correct option.
Assertion (A): Projective tests are criticized for having low reliability and validity.
Reason (R): The scoring of projective tests is often subjective and depends on the examiner's interpretation.
(A) Both A and R are true and R is the correct explanation of A.
(B) Both A and R are true but R is not the correct explanation of A.
(C) A is true but R is false.
(D) A is false but R is true.

71. Which intelligence type in Gardner's theory involves the ability to understand and interact effectively with others?
(A) Intrapersonal
(B) Naturalistic
(C) Existential
(D) Interpersonal

72. In Guilford's Structure of Intellect (SOI) model, how many factors were eventually proposed?
(A) 120
(B) 150
(C) 180
(D) 200

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73. Match the scale in List I with the target population in List II and select the correct answer:
List I: (Scale)
P. WAIS-IV
Q. WISC-V
R. WPPSI-IV
S. Stanford-Binet 5
List II: (Target Population)
1. Children (6 to 16 years)
2. Preschool and Primary (2.5 to 7.7 years)
3. Adults (16 to 90 years)
4. Wide range (2 to 85+ years)
(A) P-3, Q-1, R-2, S-4
(B) P-1, Q-3, R-4, S-2
(C) P-3, Q-2, R-1, S-4
(D) P-2, Q-1, R-4, S-3

74. Which of the following is a competency-based use of intelligence testing?
(A) Identifying specific learning disabilities to provide targeted support.
(B) Labeling students as slow learners to discourage their future efforts
(C) Ranking employees purely for entertainment and social comparison purposes
(D) Publicly disclosing IQ scores to create intense academic competition

75. What does the "Deviation IQ" represent?
(A) Mental Age divided by Chronological Age and then multiplied by 100
(B) The total number of correct answers achieved on a standardized exam
(C) The measured difference between fluid and crystallized intelligence
(D) Score based on deviation from the average score of one's age group

76. Consider the following:
I. Word Association Test
II. Rorschach Inkblot Test
III. Sentence Completion Test
Which of the above statement(s) is/are projective techniques?
(A) I and II only
(B) II and III only
(C) I and III only
(D) I, II, and III

personal material gain
(D) Possessing a high IQ while being emotionally sensitive to others

59. In the context of testing, what does "standardization of procedure" imply?
(A) Every single student receives a different set of instructions
(B) The test is translated into multiple different languages randomly
(C) Only the most intellectually gifted students can take the test
(D) The testing environment and instructions are identical for everyone

60. Read the following statements and select the correct option.
Statement I: Aptitude is the capacity to acquire a specific skill or knowledge.
Statement II: Achievement is the actual level of proficiency attained after training.
(A) Statement I is correct but Statement II is incorrect.
(B) Statement I is incorrect but Statement II is correct.
(C) Both statements are correct.
(D) Both statements are incorrect.

61. If a child has a Mental Age (MA) of 12 and a Chronological Age (CA) of 10, what is the IQ?
(A) 100
(B) 110
(C) 120
(D) 130

62. Read the following assertion and reason and select the correct option.
Assertion (A): The Stanford-Binet scale is an individual intelligence test.
Reason (R): It requires one-to-one administration and careful observation of the subject's responses.
(A) Both A and R are true and R is the correct explanation of A.
(B) Both A and R are true but R is not the correct explanation of A.
(C) A is true but R is false.
(D) A is false but R is true.

63. Which type of validity involves comparing test scores with an external criterion available at the same time?
(A) Concurrent validity
(B) Predictive validity
(C) Content validity measures
(D) Face validity measures

64. Match the intelligence type in List I with Gardner's category in List II and select the correct answer:
List I: (Intelligence Type)
P. Sensitivity to sounds and rhythms
Q. Ability to perceive the visual world accurately
R. Sensitivity to meanings and order of words
S. Knowledge of one's own strengths and weaknesses
List II: (Gardner's Category)
1. Linguistic
2. Musical
3. Intrapersonal
4. Spatial
(A) P-2, Q-4, R-1, S-3
(B) P-1, Q-2, R-3, S-4
(C) P-4, Q-3, R-2, S-1
(D) P-2, Q-1, R-4, S-3

65. Which of the following is a drawback of using "Mental Age" to calculate IQ in adults?
(A) It is mathematically too simplistic to calculate for varied populations
(B) Mental age plateaus in late adolescence while chronological age continues to increase
(C) It consistently overestimates adult intelligence quotient levels significantly
(D) It fails to account for essential verbal skills and linguistic fluency

66. Consider the following about the Bhatia Battery of Performance Tests:
I. It was developed specifically for the Indian population.
II. It includes the Kohs' Block Design Test.
III. It is a completely verbal test.
Which of the above statements is/are correct?
(A) I and II only
(B) II and III only
(C) I and III only
(D) I, II, and III

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89. Identifying the INCORRECT statement regarding "Mental Age":
(A) It was originally introduced in the 1908 Binet-Simon scale version
(B) It can potentially be higher or lower than the actual chronological age
(C) It continues to grow linearly throughout a person's entire life.
(D) It is determined strictly by the number of items passed on the test

90. Read the following assertion and reason and select the correct option.
Assertion (A): Intelligence testing can lead to self-fulfilling prophecies in educational settings.
Reason (R): Teachers may treat students differently based on their known IQ scores, affecting their performance.
(A) Both A and R are true and R is the correct explanation of A.
(B) Both A and R are true but R is not the correct explanation of A.
(C) A is true but R is false.
(D) A is false but R is true.

91. Which of the following is a component of "Crystallized Intelligence"?
(A) Speed of induction
(B) Abstract reasoning
(C) Memory span for digits
(D) Vocabulary knowledge

92. Which of the following is an ethical issue related to intelligence testing in diverse populations?
(A) Using tests that have not been linguistically or culturally adapted
(B) Administering too many performance-based assessment tasks
(C) Maintaining strict confidentiality regarding individual results
(D) Obtaining informed consent from the legal guardians of minors

93. Which Wechsler sub-test measures the ability to see the relationship between two concepts?
(A) Digit Span
(B) Picture Completion
(C) Similarities
(D) Coding

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94. Match the theory in List I with the number of factors in List II and select the correct answer:
List I: (Intelligence Theory)
P. Spearman
Q. Thurstone
R. Gardner
S. Guilford (original)
List II: (Number of Factors)
1. Two factors (g and s)
2. Seven primary abilities
3. Eight intelligences
4. One hundred and twenty factors
(A) P-1, Q-2, R-3, S-4
(B) P-2, Q-1, R-4, S-3
(C) P-1, Q-3, R-2, S-4
(D) P-4, Q-2, R-1, S-3

95. Which type of reliability is specifically used to check the equivalence of two different versions of the same test?
(A) Parallel-forms
(B) Split-half
(C) Test-retest
(D) Internal consistency

96. "Convergent thinking" is a central part of which dimension in Guilford's Structure of Intellect model?
(A) Contents
(B) Operations
(C) Products
(D) Inputs

97. Which of the following is the most appropriate way to communicate intelligence test results?
(A) Telling the person their exact IQ number without any provided context
(B) Describing the person's strengths and weaknesses within a range of scores.
(C) Posting the results on a public bulletin board for everyone to view
(D) Comparing the person to their biological siblings and relatives only

98. Which of the following is NOT an Indian adaptation of an intelligence test?
(A) Wechsler Adult Intelligence Scale (WAIS) Original version
(B) Mohsin's General Intelligence Test
(C) Bhatia's Battery of Performance Tests
(D) Jalota's Group Test of General Mental

measures what it intended to measure. A test cannot be valid if it produces inconsistent results, meaning reliability is a prerequisite for validity. However, a test can yield highly consistent results that are irrelevant to the intended construct, demonstrating that reliability is possible without achieving validity.

27. (D) To provide a frame of reference for interpreting individual scores
Norms are established by administering a test to a large, representative sample of the target population. These scores serve as a comparison group, allowing examiners to interpret an individual's performance relative to others. Without norms, a raw score would lack meaning, as there would be no way to determine if a performance is average, superior, or below the expected standard.

28. (B) Test-retest reliability
Test-retest reliability measures the stability of a test over time by administering the same assessment to the same group of people on two separate occasions. A high correlation between the two sets of scores suggests that the test is consistent and that individual differences in results are not merely due to random fluctuations or temporary changes in the testing environment.

29. (C) Wechsler Adult Intelligence Scale (WAIS)
The Wechsler Adult Intelligence Scale is an individual test, requiring a one-to-one interaction between the examiner and the subject. This format allows the psychologist to observe behavioral nuances and clinical signs that group tests cannot capture. In contrast, group tests like the Army Alpha or Raven's Progressive Matrices are designed for simultaneous administration to many people without individualized clinical observation.

30. (A) Both A and R are true and R is the correct explanation of A.
Performance tests utilize non-verbal tasks, such as block design or pattern completion, to assess cognitive abilities. Because these tasks minimize reliance on language, they are particularly effective for evaluating individuals who are illiterate or those from different linguistic backgrounds. This approach ensures that intellectual potential is measured accurately without the confounding influence of an individual's verbal proficiency or formal educational level.

31. (A) They can be administered to many people simultaneously.
Group tests are designed for efficiency, allowing large numbers of people to be assessed at the same time under standardized conditions. These tests often use multiple-choice formats and objective scoring systems, which reduces the time and cost required for evaluation. However, they provide less opportunity for the examiner to establish rapport or observe the specific problem-solving strategies of each participant.

32. (A) 3, 2, 1, 4
Test construction begins with planning and item writing to define the scope of the assessment. This is followed by item analysis to refine questions based on their difficulty and ability to discriminate between participants. Next, the test undergoes rigorous reliability and validity testing to ensure accuracy. Finally, norms are developed by testing a representative sample to provide a basis for score interpretation.

33. (B) They utilize ambiguous stimuli to reveal unconscious motives
Projective tests present ambiguous stimuli, such as inkblots or pictures, to elicit responses that reveal an individual's underlying personality traits and unconscious conflicts. The theory suggests that the subject projects their own feelings and motives onto the stimuli. Because there are no right or wrong answers, these tests provide a qualitative look into the person's psyche that structured inventories might miss.

34. (B) 10
The Rorschach Inkblot Test consists of ten standardized cards, each featuring a unique, symmetrical inkblot. Five of the cards are in black and white, while the others contain colors. The subject's interpretations of these blots are scored based on various factors like location, determinants, and content, helping clinicians identify thought patterns, emotional functioning, and underlying personality structures during diagnostic assessments.

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ANSWERS

1. (B) Alfred Binet
Alfred Binet developed the first practical intelligence test in 1905 to identify children needing educational assistance. He introduced mental age to describe a child's performance level compared to average children of the same age. This pioneered the movement toward standardized assessment, focusing on higher-level mental processes like reasoning rather than simple sensory or physical reaction time tasks.

2. (C) A is true but R is false.
Intelligence involves the holistic ability to think rationally and deal effectively with the environment, as defined by David Wechsler. While genetics provide a biological foundation, intelligence is not an unchangeable, fixed trait. Environmental stimulation, education, and nutrition significantly influence cognitive development over time, making the claim of total immutability regardless of environmental factors scientifically inaccurate in modern psychology.

3. (C) Intelligence is a single, unified capacity for judgment and reasoning.
Alfred Binet viewed intelligence as a singular, core capacity for judgment, comprehension, and reasoning. His uni-factor theory suggested that an individual possesses a general fund of mental energy that applies across various tasks. This perspective differs from later multi-factor theories which argued that intelligence consists of several distinct and independent abilities rather than one unified and global mental power.

4. (A) P-3, Q-4, R-2, S-1
Charles Spearman proposed the two-factor theory involving general and specific factors. Louis Thurstone identified seven primary mental abilities as independent clusters of intelligence. Robert Sternberg developed the triarchic theory focusing on analytical, creative, and practical aspects. Howard Gardner introduced multiple intelligences, arguing for eight distinct types. Each proponent shifted the understanding of cognitive structure within professional psychological research.

5. (C) Mental age
Mental age represents an individual's intellectual standing relative to others of the same chronological age group. If a child successfully completes tasks typical for a ten-year-old, their mental age is recorded as ten, regardless of their actual age. This metric allows educators and psychologists to determine if a student is performing at, above, or below the expected developmental level.

6. (C) I and III only
William Stern originally proposed the concept of the intelligence quotient to quantify mental development. This formula calculates the ratio of mental age to chronological age, which is then multiplied by one hundred to avoid decimals. Lewis Terman later integrated and popularized this measurement within the Stanford-Binet scale, providing a standardized method for comparing intellectual abilities across different age groups.

7. (D) The "Superior" category generally ranges from 90 to 110.
Standard IQ classification systems define the range of ninety to one hundred and nine as the average category, representing the majority of the population. The superior category actually includes scores ranging from one hundred and twenty to one hundred and twenty-nine. Accurate classification is essential for identifying individuals who may require specialized educational interventions or gifted and talented support programs.

8. (A) 2, 4, 1, 3
Intelligence scores are categorized into levels based on their distance from the population mean. In descending order of numerical score ranges, the gifted category sits at the top, followed by the superior classification. The average range encompasses the middle portion of the distribution, while the borderline category represents scores that fall just above the threshold for a diagnosis of intellectual disability.

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environmental influences, and the inherent margins of error.

44. (A) P-3, Q-2, R-1, S-4
C.H. Rice developed the Hindustani Binet Scale, while Chandra Mohan Bhatia created the Battery of Performance Tests. S. Jalota is known for his Group Test of General Mental Ability, and Pramila Phatak developed an Indian adaptation of the Draw-a-Man Test. These contributors were essential in standardizing and contextualizing psychological testing for use within the diverse cultural and linguistic landscape of India.

45. (C) Internal consistency
Internal consistency refers to how well the different items within a single test correlate with one another. If a test measures a specific trait, all the items should yield similar results for an individual. This type of reliability is often measured using Cronbach's alpha, ensuring that the test is a unified instrument rather than a collection of unrelated or contradictory questions.

46. (D) Analytical — Componential thinking
In Sternberg's Triarchic Theory, analytical intelligence is also known as componential thinking. It involves the mental processes used to solve problems, evaluate information, and perform academic tasks. This component focuses on the internal mechanisms of intelligence, such as planning, monitoring, and knowledge acquisition, which are essential for logical reasoning and successful performance in formal educational and research-oriented settings.

47. (A) I and II only
The WAIS was created to provide a more appropriate measure of adult intelligence compared to the Stanford-Binet. It utilizes the Deviation IQ, which compares an individual's score to the average of their own age group. Crucially, the WAIS includes both verbal and non-verbal performance tasks, rejecting the idea that adult intelligence should be measured through linguistic or verbal skills alone.

48. (B) g-factor
Charles Spearman described the g-factor as a universal mental energy that remains relatively constant for an individual across all cognitive tasks. While specific abilities may vary depending on the nature of the activity, the g-factor represents the underlying core of general intelligence. It is believed to influence an individual's overall performance level on any test requiring mental effort and abstract reasoning.

49. (B) Non-verbal group test
Raven's Progressive Matrices is a non-verbal test that uses geometric patterns to assess abstract reasoning and problem-solving. Because it does not require language, it is often used as a culture-fair measure of intelligence. It can be administered to large groups simultaneously, making it an efficient tool for research and general screening across diverse populations with different linguistic backgrounds.

50. (B) 80-89
In standard IQ classification, the range between eighty and eighty-nine is categorized as "Dull Normal" or "Low Average." This classification describes individuals who perform slightly below the median of ninety to one hundred and nine but do not meet the criteria for borderline intellectual functioning. Such classifications help educators understand a student's relative learning pace compared to the general population.

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51. (C) Scholastic Assessment Test (SAT)
The SAT is a classic example of an aptitude test, as it is designed to predict an individual's future academic success in college. Unlike achievement tests that measure what has already been learned in specific classes, aptitude tests evaluate the underlying potential to acquire new knowledge and skills. This predictive capability makes them valuable for admissions processes and vocational counseling in various fields.

52. (D) 1908
The concept of mental age was first introduced in the 1908 revision of the Binet-Simon scale. This addition allowed Binet to quantify a child's level of intellectual development by comparing their performance to the average results of children at different chronological ages. This innovation was a crucial step toward the modern understanding of intelligence as a developmental trait that can be measured.

practical application of intellectual skills to achieve personal goals and successfully navigate the challenges of daily life and work.

18. (A) Ability to deal with novel situations and automate processing
Experiential intelligence in Sternberg's Triarchic theory involves the ability to use existing knowledge to handle new and unfamiliar situations. It also includes the capacity to automate tasks so that they can be performed without conscious effort. This type of intelligence is often associated with creativity and the efficient processing of information during the learning of new skills and complex concepts.

19. (A) Both A and R are true and R is the correct explanation of A.
Emotional intelligence involves monitoring one's own feelings and the emotions of others to guide thinking and action. High emotional intelligence often predicts professional and personal success because it enables better conflict resolution, teamwork, and leadership. While traditional IQ measures cognitive potential, the ability to manage social complexity and emotional regulation provides a crucial advantage in navigating the demands of life.

20. (D) Musical — Accountants and Engineers
Musical intelligence involves sensitivity to rhythm, pitch, and melody, which is characteristic of musicians, composers, and singers. Accountants and engineers are typically associated with logical-mathematical intelligence, which focuses on numerical patterns and structured reasoning. Mispairing these roles ignores Gardner's specific definitions of how distinct intelligences manifest in various professional fields and specialized human activities throughout different cultures.

21. (C) Nature vs. Nurture
The nature versus nurture debate examines the extent to which intelligence is determined by biological heredity or environmental influences. Nature refers to genetic predispositions, while nurture encompasses factors like upbringing, education, and nutrition. Most contemporary psychologists agree that intelligence is a product of complex interactions between both variables, as genetics provide a potential range that environmental factors help to realize.

22. (B) Intelligence scores have been steadily increasing over generations.
The Flynn Effect describes the observed rise in average IQ scores across various populations during the twentieth century. This trend suggests that improved nutrition, better healthcare, and more complex environmental stimulation have contributed to enhanced cognitive performance over time. It highlights the significant role that environmental factors play in shaping the measured intelligence of whole populations across successive generations of people.

23. (D) Verbal comprehension
Verbal comprehension, a component of crystallized intelligence, typically shows the most stability throughout the adult lifespan. While processing speed and novel problem-solving often decline as part of the normal aging process, knowledge of language and general information tends to remain intact or improve. This stability reflects the cumulative nature of learning and the durability of well-established cognitive structures in the brain.

24. (A) Women generally perform better on tasks involving verbal fluency.
Psychological research indicates that women often excel in tasks requiring verbal fluency, spelling, and writing. Conversely, men frequently perform better on certain spatial and mathematical reasoning tasks. However, there is no significant difference in average general intelligence between genders. These variations are often attributed to a complex mix of biological factors and different socialization patterns within various cultural contexts.

25. (A) P-1, Q-2, R-3, S-4
Reliability ensures that a test produces consistent results over time. Validity determines if the test accurately measures the intended construct. Norms provide a statistical frame of reference by showing how a representative group performed on the test. Standardization involves maintaining uniform procedures during administration and scoring to ensure that every examinee is treated fairly and evaluated against the same criteria.

26. (A) I and II only
Reliability refers to the consistency of test scores, while validity indicates whether a test actually

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9. (C) Specific abilities unique to particular tasks
Charles Spearman identified the s-factor as a specific mental ability required for performing a particular task or activity. Unlike the general factor which applies broadly to all intellectual functions, s-factors are localized to specific domains such as music, mathematics, or verbal tasks. An individual may possess a high general intelligence while showing varying levels of proficiency in these factors.

10. (A) Both A and R are true and R is the correct explanation of A.
Louis Thurstone argued against a single general intelligence factor, proposing instead that intelligence consists of seven primary mental abilities. These include word fluency, verbal comprehension, spatial visualization, number facility, associative memory, reasoning, and perceptual speed. By identifying these independent clusters, he provided a more nuanced view of cognitive skills that challenged the prevailing uni-factor perspective established by Spearman.

11. (D) Contents
In Guilford's Structure of Intellect model, contents refer to the specific types of information an individual perceives and processes. These types include visual, auditory, symbolic, semantic, and behavioral information. This dimension highlights the raw material of thought, serving as the input for mental operations which eventually lead to various products, creating a complex three-dimensional model of human intellectual functioning.

12. (B) Semantic units
The operations dimension in Guilford's model includes mental processes such as memory, divergent thinking, convergent thinking, and cognition. These represent how the brain works on information. Semantic units, however, belong to the products dimension, which describes the results of applying operations to contents. Distinguishing between mental processes and the resulting information structures is a fundamental aspect of this theoretical model.

13. (A) P-2, Q-1, R-3, S-4
Fluid intelligence is considered a biological and neurological capacity for reasoning, whereas crystallized intelligence involves acquired knowledge and skills. Raymond Cattell's investment theory suggests that fluid intelligence is invested in learning, eventually leading to crystallized intelligence. Environmental and cultural factors have a high impact on the development of crystallized intelligence, as it depends heavily on formal education and experience.

14. (B) Statement I is incorrect but Statement II is correct.
Fluid intelligence involves the ability to reason abstractly and solve novel problems, which typically begins to decline after early adulthood. Conversely, crystallized intelligence represents the accumulation of knowledge, facts, and skills acquired through education and experience. This type of intelligence tends to remain stable or even increase across the lifespan as individuals continue to learn and grow within their culture.

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15. (C) 8
Howard Gardner proposed the theory of multiple intelligences, moving away from the idea of a single general factor. He originally identified seven distinct types and later added an eighth, naturalistic intelligence. This model emphasizes that individuals possess different strengths across diverse domains such as linguistic, logical, musical, and interpersonal skills, rather than having a fixed amount of general mental energy.

16. (A) I and II only
Howard Gardner's theory includes intrapersonal intelligence, which involves understanding oneself, and logical-mathematical intelligence, which focuses on reasoning and numerical patterns. While creative thinking is a significant psychological construct, Gardner did not classify it as a separate, distinct type of intelligence in his original list of eight. Instead, he argued that creativity can be expressed within any of the identified intelligence domains.

17. (B) Contextual
Contextual intelligence, often called practical intelligence or street smarts, is the ability to adapt to one's environment or change the environment to suit one's needs. This sub-theory in Sternberg's model emphasizes applying internal knowledge to real-world situations. It focuses on the

35. (A) P-2, Q-1, R-4, S-3
The Thematic Apperception Test is a projective technique using pictures. The Minnesota Multiphasic Personality Inventory is a structured self-report personality inventory. The Stanford-Binet is a classic individual intelligence test requiring one-to-one administration. Raven's Progressive Matrices is a non-verbal test often used in group settings to measure abstract reasoning. Matching these correctly requires understanding the different methodologies used in psychological assessment.

36. (D) Tell stories about ambiguous pictures
In the Thematic Apperception Test, subjects are shown a series of ambiguous drawings and asked to create a narrative about each one. They must describe what led to the scene, what is happening, and how the characters feel. These stories are analyzed to uncover the person's dominant needs, emotions, and conflicts, providing deep insights into their personality and social interactions.

37. (C) MMPI
The Minnesota Multiphasic Personality Inventory is a comprehensive self-report tool specifically designed for the clinical diagnosis of psychological disorders. It features various scales that measure traits such as depression, paranoia, and hysteria. Because of its rigorous standardization and objective scoring, it is one of the most widely used instruments in mental health settings for identifying psychopathology and planning clinical treatments.

38. (A) I and II only
Achievement tests assess the knowledge and skills a person has already acquired through training or education. Aptitude tests are designed to predict future performance by measuring the potential to learn a specific skill. While intelligence tests measure general mental capacity, they are distinct from specific achievement tests, as they focus on broader cognitive potential rather than specific curriculum-based learning outcomes.

39. (D) Lewis Terman
Lewis Terman, a psychologist at Stanford University, adapted the original Binet-Simon scale for use in the United States. His 1916 revision, known as the Stanford-Binet, introduced the concept of the Intelligence Quotient (IQ) and expanded the age range of the test. This adaptation became a foundational tool in American psychology, setting the standard for individual intelligence testing for decades.

40. (A) WISC
The Wechsler Intelligence Scale for Children is specifically designed for subjects between the ages of six and sixteen. It includes several sub-tests that measure both verbal and non-verbal performance abilities, providing a comprehensive profile of a child's cognitive strengths and weaknesses. The WISC is widely used in educational and clinical settings to identify learning disabilities and intellectual giftedness in students.

41. (A) Both A and R are true and R is the correct explanation of A.
David Wechsler believed that intelligence is a multi-faceted construct involving the total personality. To capture this complexity, his scales provide separate scores for verbal and performance tasks, which are combined into a Full Scale IQ. This structure allows clinicians to identify specific cognitive deficits and strengths, offering a more detailed understanding of an individual's intellectual functioning than a single score alone.

42. (A) C.H. Rice
C.H. Rice was a pioneer in Indian psychology who developed the Hindustani Binet Performance Point Scale in the 1920s. This was the first systematic effort to adapt Western intelligence testing methods to the Indian cultural and linguistic context. His work paved the way for further local developments in psychological assessment, ensuring that tests were more appropriate for evaluating the cognitive abilities of Indian populations.

43. (D) Labeling individuals based on a single test score
Ethical guidelines emphasize the importance of informed consent, confidentiality, and the accurate communication of test results to the examinee. These practices protect the rights and well-being of the individual being tested. Conversely, labeling someone based on a single score is considered a misuse of testing, as it fails to account for the person's full potential,

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by one hundred. For a child with a mental age of twelve and a chronological age of ten, the ratio is one point two. Multiplying this by one hundred results in an IQ of one hundred and twenty, indicating that the child is performing above average.

62. (A) Both A and R are true and R is the correct explanation of A.
The Stanford-Binet is designed as an individual intelligence test, meaning it must be administered by a trained professional to one person at a time. This format allows the examiner to provide specific instructions and carefully observe the subject's verbal and non-verbal reactions. The qualitative data gathered during this one-to-one interaction is just as important as the final numerical score for clinical diagnosis.

63. (A) Concurrent validity
Concurrent validity is established when a test's scores are compared with an existing, independent measure of the same construct at the same time. For example, if a new intelligence test correlates highly with an established scale like the WAIS administered simultaneously, it demonstrates concurrent validity. This ensures the new instrument accurately reflects current performance levels relative to recognized and proven psychological standards.

64. (A) P-2, Q-4, R-1, S-3
Musical intelligence involves sensitivity to rhythm and sound. Spatial intelligence is the ability to perceive and manipulate the visual world. Linguistic intelligence focuses on the mastery of language and word meanings. Intrapersonal intelligence involves deep self-knowledge and awareness of one's own inner state. Matching these correctly illustrates Gardner's view of how different cognitive strengths manifest as independent and distinct mental domains.

65. (B) Mental age plateaus in late adolescence while chronological age continues to increase
Calculating IQ using mental age is problematic for adults because intellectual development typically levels off in late adolescence. While chronological age continues to rise throughout life, the number of test items passed does not increase proportionally. This would lead to a steadily declining IQ score as a person ages, which does not accurately reflect the actual stability of adult intellectual functioning and cognitive capacity.

66. (A) I and II only
The Bhatia Battery of Performance Tests was developed specifically for the Indian population to provide a culturally appropriate measure of intelligence. It consists of five non-verbal sub-tests, including the Kohs' Block Design Test. Because it relies on physical manipulation rather than language, it is highly useful for assessing individuals with varying educational backgrounds or linguistic abilities within the Indian context.

67. (C) Acquired environmental intelligence
In the context of the nature versus nurture debate, intelligence influenced by nurture is often referred to as acquired or environmental intelligence. This encompasses the knowledge, cognitive strategies, and problem-solving skills developed through life experiences, education, and cultural exposure. It highlights how an individual's potential, provided by genetics, is shaped and expanded by the richness of their upbringing and formal learning opportunities.

68. (D) It is entirely determined at birth and cannot be learned.
Unlike traditional IQ, which is thought to have a strong genetic component, emotional intelligence is widely viewed as a set of skills that can be developed and improved over time. Through practice and self-reflection, individuals can enhance their self-awareness, empathy, and social skills. Claiming that it is fixed at birth ignores the significant impact of emotional learning and social development throughout the lifespan.

69. (C) Army Beta
The Army Beta was developed during World War I to assess the intelligence of recruits who were illiterate or non-English speakers. As a non-verbal test, it used pictures and mazes rather than written or spoken words. In contrast, the Army Alpha and the Binet-Simon Scale relied heavily on verbal skills, making them unsuitable for testing individuals with limited literacy or language proficiency.

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53. (C) It refers to the repeatability of a test score.
Reliability in psychological testing refers to the consistency and stability of scores across different administrations or observers. A reliable test will produce similar results for the same individual under consistent conditions. While reliability is necessary for validity, it does not guarantee it. Repeatability ensures that the measured differences between individuals are due to actual traits rather than random error or testing inconsistencies.

54. (B) All individuals possess the same profile of the 8 intelligences.
Howard Gardner argued that while every person possesses all eight intelligences to some degree, no two individuals have the exact same profile. Each person has a unique combination of strengths and weaknesses across domains like linguistic, spatial, and interpersonal skills. This diversity explains why some people excel in mathematics while others may be gifted in music or physical coordination within various cultures.

55. (D) Fluid — Novel problem solving
Fluid intelligence is the capacity to think logically and solve problems in novel situations, independent of acquired knowledge. It involves inductive and deductive reasoning and is generally thought to be rooted in biological potential. In contrast, crystallized intelligence involves the use of skills and knowledge learned through experience and education, which tends to increase as individuals age and gain more information.

56. (A) Standardization — Subjective scoring
Standardization is a critical criterion for psychological tests that requires uniform procedures for administration and objective scoring. Subjective scoring, which relies on the personal interpretation of the examiner, is the opposite of standardization. A standardized test ensures that results are comparable across different individuals because everyone is evaluated using the same consistent rules, timing, and clear scoring criteria without personal bias.

57. (C) Minnesota Multiphasic Personality Inventory (MMPI)
The MMPI is a structured, objective self-report inventory that uses true-false statements to assess personality traits and psychopathology. In contrast, projective tests like the Word Association Test or the House-Tree-Person test use ambiguous stimuli to reveal unconscious thoughts. The MMPI's reliance on direct questions and standardized scoring makes it fundamentally different from the interpretive and subjective nature of various projective assessment techniques.

58. (A) Capacity to recognize, understand, and manage emotions
Emotional intelligence involves the ability to perceive and interpret one's own emotions and those of others correctly. It also includes using this emotional information to guide thinking and regulate behavior effectively. This construct is vital for social success, as it facilitates empathy, effective communication, and the ability to handle interpersonal relationships with sensitivity, which are key components for personal and professional growth.

59. (D) The testing environment and instructions are identical for everyone
Standardization of procedure ensures that every person taking the test receives the same instructions, time limits, and environmental conditions. This uniformity minimizes external variables that could unfairly influence test scores. By maintaining a consistent testing experience, psychologists can ensure that differences in performance reflect actual differences in the ability being measured rather than variations in how the test was administered to participants.

60. (C) Both statements are correct.
Aptitude refers to an individual's innate or acquired potential to learn a particular skill or type of knowledge in the future. Achievement, on the other hand, measures the actual proficiency or mastery a person has already attained following specific training or education. Understanding both concepts is essential for educational planning, as aptitude indicates what someone could do, while achievement shows what they have done.

61. (C) 120
The original Intelligence Quotient formula is calculated by dividing mental age by chronological age and then multiplying the result

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Ability

99. In the context of the Triarchic Theory, "Analytical Intelligence" is synonymous with which of the following?
(A) Practical thinking skills
(B) Creative thinking skills
(C) Componential thinking
(D) Social thinking skills

100. Which of the following IQ ranges is classified as "Intellectual Disability"?
(A) Below 70
(B) 70-80
(C) 80-90
(D) 90-110

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70. (A) Both A and R are true and R is the correct explanation of A.
Projective tests are often criticized because they lack the rigorous standardization and objective scoring found in other psychological assessments. Because there are no fixed correct answers, the results depend heavily on the clinician's subjective interpretation of the subject's responses. This variability leads to lower reliability and validity, as different examiners might interpret the same response in significantly different ways during the assessment.

71. (D) Interpersonal
Interpersonal intelligence is the ability to understand and interact effectively with other people. It involves sensitivity to their moods, temperaments, motivations, and intentions. Individuals with high interpersonal intelligence, such as teachers, politicians, and therapists, are skilled at communication, conflict resolution, and building strong social relationships. This capacity is distinct from intrapersonal intelligence, which focuses on understanding one's own internal self and emotions.

72. (C) 180
J.P. Guilford's Structure of Intellect model initially proposed one hundred and twenty independent factors of intelligence. As research progressed, the model was expanded to include one hundred and fifty and eventually one hundred and eighty distinct factors. These factors result from the interaction of three dimensions: five types of contents, six types of products, and six types of operations, representing a highly complex view of cognition.

73. (A) P-3, Q-1, R-2, S-4
The WAIS-IV is designed for adults up to age ninety, while the WISC-V targets school-aged children. The WPPSI-IV is specifically for preschool and primary students. The Stanford-Binet 5 is unique because it offers a wide age range covering individuals from early childhood through late adulthood. Selecting the appropriate scale is crucial for ensuring that the assessment is developmentally appropriate for the person being tested.

74. (A) Identifying specific learning disabilities to provide targeted support.
A constructive and competency-based use of intelligence testing is to identify a student's cognitive profile to uncover specific learning disabilities. This information allows educators to develop personalized learning plans and provide necessary accommodations. This approach focuses on helping the individual reach their full potential rather than using scores to label or limit their opportunities, aligning with ethical standards in educational and psychological practice.

75. (D) Score based on deviation from the average score of one's age group
Deviation IQ is a statistical method that interprets an intelligence score based on its relative position within a normal distribution for a specific age group. It uses the mean and standard deviation to determine how far an individual's score falls from the average. This approach replaced the older mental age ratio because it provides a more accurate and stable measurement of intelligence across the adult lifespan.

76. (D) I, II, and III
The Word Association Test, Rorschach Inkblot Test, and Sentence Completion Test are all projective techniques. They share the common characteristic of using ambiguous or open-ended stimuli to encourage the subject to project their unconscious thoughts and personality traits into their responses. Unlike objective tests with fixed answers, these methods provide qualitative insights into a person's emotional functioning and underlying psychological dynamics.

77. (C) Musical Ability
Louis Thurstone's theory of Primary Mental Abilities identified seven independent factors, including verbal comprehension, numerical ability, and spatial visualization. However, he did not include musical ability as one of his core factors. While musical talent is recognized as a form of intelligence in Howard Gardner's later theory, Thurstone focused on mental abilities that he believed were fundamental to a wide range of academic and cognitive tasks.

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explanation of A.
(C) A is true but R is false.
(D) A is false but R is true.

9. Which of the following pairs is correctly matched regarding the Arousal Theory of motivation?
(A) High Arousal — Best performance on complex tasks
(B) Low Arousal — Maximum alertness and focus
(C) Optimal Arousal — Performance is at its peak
(D) Zero Arousal — State of highest cognitive efficiency

10. A person continues to study for ten hours straight to pass a difficult exam despite feeling exhausted. Which criterion of motivated behavior is most prominently displayed?
(A) Persistence
(B) Direction
(C) Energization
(D) Instinct

11. Match the items in List I with those in List II and select the correct answer using the codes given below:
List I: (Motive Type/Criteria)
P. Primary Motive
Q. Secondary Motive
R. Criteria: Intensity
S. Criteria: Direction
List II: (Example/Description)
1. Choosing a specific career path
2. Strength of a physical effort
3. Sleep
4. Need for Affiliation
(A) P-3, Q-4, R-2, S-1
(B) P-4, Q-3, R-1, S-2
(C) P-3, Q-1, R-4, S-2
(D) P-1, Q-2, R-3, S-4

12. The state of internal physiological balance that the body attempts to maintain is known as:
(A) Self-actualization
(B) Homeostasis
(C) Incentive
(D) Hyperpolarization

13. Who among the following psychologists is primarily associated with the study of Achievement Motivation?
(A) Abraham Maslow
(B) Sigmund Freud
(C) David McClelland
(D) Hans Eysenck

14. In Herzberg's Two-Factor Theory, which of the following is classified as a 'Motivator' rather than a 'Hygiene Factor'?
(A) Competitive base salary
(B) General working conditions
(C) Internal company policies
(D) Achievement recognition

15. Consider the following levels in Maslow's Hierarchy of Needs:
I. Safety needs
II. Belongingness and love needs
III. Physiological needs
Which of these must be satisfied first according to the hierarchy?
(A) I only
(B) II only
(C) III only
(D) I and II only

16. Which of the following statements about Maslow's 'Self-actualization' is incorrect?
(A) It is the highest level of the hierarchy.
(B) It is a deficiency-based motive similar to hunger.
(C) It refers to the realization of one's full potential.
(D) It can only be pursued after lower-level needs are met.

17. Which need in Maslow's hierarchy is most likely being addressed when a person seeks a stable job with a pension plan?
(A) Physiological needs
(B) Safety needs
(C) Esteem needs
(D) Self-actualization

18. Read the following assertion and reason and choose the correct option:
Assertion (A): Individuals with high achievement motivation prefer tasks of intermediate difficulty.

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patterns rather than cognitive or intellectual abilities, making it distinct from traditional IQ assessments used in clinical settings.

87. (D) Norms
Norms refer to the standardized data collected from a large, representative sample that serves as a comparison group for interpreting individual test scores. By knowing how the "average" person in a specific population performs, psychologists can determine where a particular examinee's score falls. Norms are essential for transforming raw data into meaningful psychological information that can be used for classification and diagnostic purposes.

88. (A) Naturalistic
Naturalistic intelligence, the eighth type added to Gardner's theory, involves sensitivity to the natural world and the ability to recognize and classify various species of flora and fauna. Botanists, hunters, and farmers typically excel in this domain. This intelligence reflects an evolutionary capacity to understand one's environment, which was historically crucial for survival and remains important in many scientific and outdoor professions today.

89. (C) It continues to grow linearly throughout a person's entire life.
Mental age describes a child's cognitive development relative to their peers, but it does not grow linearly forever. Research shows that mental development plateaus during late adolescence as basic cognitive structures mature. While individuals continue to acquire knowledge throughout their lives, the rate of underlying mental growth as measured by standard intelligence tests slows down, making mental age an inappropriate metric for evaluating adult intelligence.

90. (A) Both A and R are true and R is the correct explanation of A.
Knowing a student's IQ score can lead teachers to form subconscious expectations that influence their instructional style. If a teacher believes a student has a low IQ, they may provide less challenging work or lower expectations, which in turn hinders the student's performance. This self-fulfilling prophecy demonstrates how the misuse of intelligence data can negatively impact educational outcomes and student self-esteem.

91. (D) Vocabulary knowledge
Crystallized intelligence consists of the knowledge and skills that a person accumulates through education and life experience. Vocabulary knowledge is a prime example, as it grows over time with reading, schooling, and social interaction. Unlike fluid intelligence, which involves abstract reasoning and processing speed, crystallized intelligence is highly dependent on cultural exposure and formal learning, remaining stable or even improving well into late adulthood.

92. (A) Using tests that have not been linguistically or culturally adapted
Administering tests that are not linguistically or culturally adapted is a major ethical concern because it can lead to inaccurate assessments of intellectual potential. If a test assumes familiarity with specific Western cultural concepts or requires fluency in a language that is not the examinee's primary tongue, the results will be biased. Ethical practice requires using fair, valid, and culturally sensitive tools to evaluate diverse populations.

93. (C) Similarities
The Similarities sub-test in the Wechsler scales asks the subject to explain how two different things are alike, such as a "poem" and a "statue." This task measures verbal concept formation, abstract reasoning, and the ability to perceive relationships between concepts. It is a powerful indicator of general intelligence (g) because it requires more than just rote knowledge, involving active mental synthesis and categorization.

94. (A) P-1, Q-2, R-3, S-4
Spearman proposed two factors, while Thurstone identified seven primary mental abilities. Gardner's theory of multiple intelligences eventually grew to include eight distinct types. Guilford's original model was the most complex, starting with one hundred and twenty unique factors. These varying numbers reflect different theoretical perspectives on whether intelligence is a unified trait or a collection of many independent and specialized cognitive abilities.

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(D) n-Pow — Desire for close interpersonal relationships

45. Consider the following psychological motives:
I. Achievement
II. Affiliation
III. Thirst
Which of the statements given above correctly identify secondary motives?
(A) I and II only
(B) II and III only
(C) I and III only
(D) I, II, and III

46. At what stage of language development does a child typically begin to use strings of two words like "Dada come"?
(A) Holophrastic stage
(B) Telegraphic stage
(C) Prelinguistic stage
(D) Two-word stage

47. Which of the following statements about Maslow's hierarchy is incorrect?
(A) All individuals eventually reach self-actualization.
(B) Love and belongingness needs appear after safety needs.
(C) Self-actualization is a "growth" need.
(D) Physiological needs are the most prepotent.

48. Read the following assertion and reason and choose the correct option:
Assertion (A): Personality reflects the consistency of an individual's behavior across different situations.
Reason (R): Personality traits are entirely determined by the external environment and change every hour.
(A) Both A and R are true and R is the correct explanation of A.
(B) Both A and R are true but R is not the correct explanation of A.
(C) A is true but R is false.
(D) A is false but R is true.

49. According to Herzberg, which of the following would likely lead to job satisfaction if improved?
(A) Company policy
(B) Challenging work
(C) Technical supervision
(D) Interpersonal relations with peers

50. In the Big Five model, individuals who score high on 'Neuroticism' are generally:
(A) Prone to anxiety and emotional instability.
(B) Usually calm and even-tempered in stress.
(C) Inherently creative and intellectually curious.
(D) Consistently organized and hardworking.

51. Match the items in List I with those in List II and select the correct answer using the codes given below:
List I: (Stage)
P. Cooing
Q. Babbling
R. Holophrase
S. Telegraphic
List II: (Age/Feature)
1. Consonants and vowels combined
2. Two-word concise sentences
3. Single word expressing a whole thought
4. Vowel-like sounds
(A) P-4, Q-1, R-3, S-2
(B) P-1, Q-4, R-2, S-3
(C) P-4, Q-3, R-1, S-2
(D) P-3, Q-2, R-4, S-1

52. Which of the following is an incorrect pair of personality theorists and their focus?
(A) Jung — Introversion/Extraversion
(B) Eysenck — Psychoticism
(C) McCrae & Costa — Big Five
(D) Freud — Self-actualization

53. Arrange the following needs in Maslow's hierarchy from the lowest (base) to the highest (peak):
1. Esteem
2. Safety
3. Physiological
4. Self-actualization
5. Love/Belonging
(A) 3-2-5-1-4
(B) 3-5-2-1-4
(C) 2-3-5-1-4
(D) 3-2-1-5-4

54. Which part of Freud's personality structure acts as the "executive," balancing internal desires and external constraints?

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CHAPTER 20

Motivation Language and Personality

1. Which of the following best defines motivation in the context of psychological study?
(A) A static state following goal achievement
(B) A process that guides and maintains behavior
(C) A biological reflex to external environments
(D) A cognitive ability to recall information

2. Which of the following is categorized as a primary or biological motive?
(A) The physiological drive to maintain body temperature.
(B) The need for achievement in a professional career.
(C) The desire for social recognition and status.
(D) The aspiration to acquire power over others.

3. Arrange the following criteria of motivated behavior in the logical sequence of an action cycle:
1. Direction
2. Energization
3. Intensity
4. Persistence

(A) 2, 1, 3, 4
(B) 1, 2, 4, 3
(C) 2, 3, 1, 4
(D) 4, 3, 2, 1

4. Which of the following is NOT considered a secondary or psychological motive?
(A) Need for social affiliation
(B) Need for personal self-esteem
(C) Need for interpersonal power
(D) Need for relief from thirst

5. Consider the following statements regarding 'Energization' as a criterion of motivation:
I. It refers to the arousal of behavior.
II. It provides the necessary strength to initiate an action.
III. It ensures that the behavior is directed toward a specific goal.
Which of the statements given above are correct?
(A) I and II only
(B) II and III only
(C) I and III only
(D) I, II, and III

6. Read the following statements regarding the criteria of motivation and choose the correct option:
Statement I: Intensity in motivation refers to the vigor or strength of a response.
Statement II: Persistence refers to the duration for which a motivated behavior is sustained.
(A) Statement I is correct, but Statement II is incorrect.
(B) Statement I is incorrect, but Statement II is correct.
(C) Both Statement I and Statement II are correct.
(D) Both Statement I and Statement II are incorrect.

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7. According to Clark Hull's Drive Reduction Theory, what is the primary goal of motivated behavior?
(A) To increase the level of internal tension and arousal.
(B) To seek out new and complex environmental stimuli.
(C) To achieve self-actualization through cognitive growth.
(D) To maintain a state of biological homeostasis.

8. Read the following assertion and reason and choose the correct option:
Assertion (A): Instinct theory suggests that motivation is primarily based on innate, biological patterns of behavior.
Reason (R): These instincts are learned through environmental conditioning and social observation.
(A) Both A and R are true and R is the correct explanation of A.
(B) Both A and R are true but R is not the correct

95. (A) Parallel-forms
Parallel-forms reliability involves creating two different but equivalent versions of the same test and administering them to the same group. If the scores on both versions are highly correlated, the test is considered reliable. This method is particularly useful for avoiding the "practice effect," where participants might perform better on a second administration simply because they remember the questions from the first time they were tested.

96. (B) Operations
In Guilford's Structure of Intellect model, convergent thinking is a mental operation. It involves synthesizing various pieces of information to arrive at a single, correct solution to a problem. This is the type of thinking typically required for standardized intelligence tests and academic examinations. It contrasts with divergent thinking, another operation that involves generating multiple creative possibilities or solutions from a single starting point.

97. (B) Describing the person's strengths and weaknesses within a range of scores.
Communicating test results ethically involves providing a nuanced description of an individual's cognitive profile rather than just a single number. Since every test has a margin of error, scores should be reported as a range. Explaining strengths and weaknesses in specific areas helps the individual understand their abilities better and provides a more constructive basis for educational or vocational planning.

98. (A) WAIS Original version
The original version of the Wechsler Adult Intelligence Scale was developed for use in the United States. While Indian psychologists like Bhatia, Mohsin, and Jalota created or adapted tests specifically for the Indian cultural context, the original WAIS remains a Western instrument. To be used effectively in India, such scales must undergo rigorous adaptation and standardization to account for linguistic and cultural differences among the population.

99. (C) Componential thinking
Sternberg's triarchic theory equates analytical intelligence with componential thinking, which involves the internal mental mechanisms used to solve problems and process information. This includes meta-components for planning and performance components for executing tasks. It is the type of intelligence most often measured by traditional IQ tests and is crucial for academic success, focusing on the logical analysis of data within formal research and learning environments.

100. (A) Below 70
Intellectual disability is characterized by significant limitations in both intellectual functioning and adaptive behavior. On standardized intelligence tests, a score below seventy is typically the numerical threshold for this classification. This diagnosis also requires evidence that these limitations originated during the developmental period and significantly affect the individual's ability to navigate everyday social and practical tasks independently in their community environment.

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Reason (R): Such tasks provide a balance between the challenge and the likelihood of success.
(A) Both A and R are true and R is the correct explanation of A.
(B) Both A and R are true but R is not the correct explanation of A.
(C) A is true but R is false.
(D) A is false but R is true.

19. Read the following statements regarding motivational theories and choose the correct option:
Statement I: Herzberg argued that hygiene factors do not lead to higher motivation but prevent dissatisfaction.
Statement II: McClelland's theory focuses on three needs: Achievement, Power, and Affiliation.
(A) Statement I is correct, but Statement II is incorrect.
(B) Statement I is incorrect, but Statement II is correct.
(C) Both Statement I and Statement II are correct.
(D) Both Statement I and Statement II are incorrect.

20. Which of the following pairs regarding language development is incorrectly matched?
(A) Cooing — Vowel-like sounds
(B) Babbling — Consonant-vowel combinations
(C) Telegraphic speech — Essential nouns and verbs only
(D) Holophrastic stage — Multi-word complex sentences

21. Match the items in List I with those in List II and select the correct answer using the codes given below:
List I: (Language Stage)
P. Prelinguistic
Q. One-word
R. Two-word
S. Full sentences
List II: (Description)
1. "Milk gone"
2. Complex grammar usage
3. Babbling and cooing
4. "Juice" (to mean "I want juice")
(A) P-3, Q-4, R-1, S-2
(B) P-1, Q-2, R-3, S-4
(C) P-3, Q-1, R-4, S-2
(D) P-4, Q-3, R-2, S-1

22. Noam Chomsky proposed the existence of a 'LAD' to explain language acquisition. What does LAD stand for?
(A) Language Association Device
(B) Language Acquisition Device
(C) Linguistic Analysis Department
(D) Learning Ability Development

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23. A child says "Go car" to indicate that they want to go for a ride. This is an example of:
(A) Holophrastic speech
(B) Cooing
(C) Overextension
(D) Telegraphic speech

24. Which of the following is NOT a core tenet of the Learning Theory of language development (e.g., Skinner)?
(A) Innate biological blueprint
(B) Reinforcement of verbal behavior
(C) Imitation of observed adult words
(D) Environment shapes linguistic habit

25. Consider the following characteristics of the Prelinguistic stage:
I. It occurs before the production of the first true word.
II. It includes the stage of babbling.
III. It involves the use of holophrases to communicate complex ideas.
Which of the statements given above are correct?
(A) I and II only
(B) II and III only
(C) I and III only
(D) I, II, and III

26. In psychological terms, personality is best defined as:
(A) A stable pattern of thoughts, feelings, and actions
(B) The outward physical appearance of an individual
(C) A temporary mood change based on circumstances
(D) The level of cognitive ability and intelligence

78. (D) Reliability
Reliability is the hallmark of a good psychological test, indicating that the measurement is consistent and dependable. It ensures that if the test is repeated over time or evaluated by different observers, the results will remain similar. Without high reliability, a test's scores would be erratic and meaningless, as it would be impossible to determine if changes in performance reflect actual changes in the trait or measurement error.

79. (A) Experiential — Creative Intelligence
In Sternberg's Triarchic Theory, experiential intelligence is equivalent to creative intelligence. It refers to the ability to handle novel situations and find innovative solutions to problems. This component of intelligence is essential for adaptation and discovery. It allows individuals to move beyond rote learning and apply their existing knowledge in fresh, flexible ways to navigate unfamiliar challenges and create new ideas or products.

80. (A) Both A and R are true and R is the correct explanation of A.
Cultural bias is a major concern because many traditional intelligence tests were developed using Western linguistic and social standards. If a test requires specific cultural knowledge or uses language unfamiliar to the examinee, it may underestimate their actual intellectual potential. Recognizing this bias is essential for psychologists to ensure that assessments are fair and representative of the diverse backgrounds found in modern global populations.

81. (B) Block Design
Block Design is a performance sub-test in the Wechsler scales that requires the subject to recreate a specific pattern using colored cubes. It measures non-verbal reasoning, spatial visualization, and motor coordination. Unlike verbal sub-tests such as vocabulary or information, which rely on acquired knowledge, Block Design assesses the ability to analyze and synthesize abstract visual information, making it a key indicator of fluid intelligence.

82. (D) 140
While classification systems vary slightly, an IQ score of one hundred and forty or above is traditionally used to identify individuals in the "Genius" or "Very Superior" category. These scores represent the top fraction of a percentage of the population. Individuals in this range often demonstrate exceptional problem-solving abilities and creativity, though high IQ alone does not guarantee achievement without motivation and environmental support.

83. (C) E.G. Boring
E.G. Boring famously provided an operational definition of intelligence, stating that it is simply what intelligence tests measure. This perspective highlights the challenge of defining intelligence as a theoretical construct versus a measurable variable. It emphasizes that our understanding of intelligence is often limited by the specific tools and methods we use to assess it, a point of ongoing debate among psychological researchers.

84. (D) G-factor — Varies from task to task within an individual
Charles Spearman's theory defines the g-factor as a general mental energy that remains constant for an individual across all cognitive tasks. In contrast, the s-factor represents specific abilities that vary depending on the particular task being performed. The claim that the g-factor varies from task to task is incorrect, as its defining characteristic is its universal and stable influence on all intellectual performance.

85. (C) They lack the opportunity to establish rapport with the test-taker.
A primary disadvantage of group intelligence tests is the limited interaction between the examiner and the participants. This makes it impossible to build rapport, which can negatively affect the performance of anxious or unmotivated individuals. Furthermore, the examiner cannot observe the specific problem-solving behaviors or clinical signs that might provide important context for interpreting the final numerical score of each examinee.

86. (A) I and II only
The Minnesota Multiphasic Personality Inventory is a comprehensive self-report inventory consisting of hundreds of statements. It is used to assess personality traits and clinical psychopathology, not intelligence. While it is a standardized tool with objective scoring, its focus is strictly on emotional and behavioral

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(C) I and III only
(D) I, II, and III

36. Which of the following is NOT typically a trait associated with an 'Extrovert' in Jung's theory?
(A) High levels of sociability
(B) Preference for external reality
(C) Assertiveness in social groups
(D) Reflective internal nature

37. Which of the following is a correct statement regarding psychological motives?
(A) They are essential for the survival of the species but not the individual.
(B) They are triggered by a deficit in local tissue in the body.
(C) They are primarily learned through social interaction and experience.
(D) They are independent of the individual's cultural background.

38. Read the following assertion and reason and choose the correct option:
Assertion (A): Hull's theory emphasizes that drives arise from biological needs.
Reason (R): A drive is an internal state of tension that motivates an organism to engage in activities to reduce this tension.
(A) Both A and R are true and R is the correct explanation of A.
(B) Both A and R are true but R is not the correct explanation of A.
(C) A is true but R is false.
(D) A is false but R is true.

39. Which of the following statements about the 'Intensity' of motivation is incorrect?
(A) The total magnitude of physical effort expended
(B) Observable vigor through the force of a response
(C) It is one of the four major criteria of motivated behavior.
(D) Direct correlation with peak performance

40. An individual who seeks respect, status, and recognition from others is focusing on which level of Maslow's hierarchy?
(A) Esteem needs
(B) Belongingness needs
(C) Safety needs
(D) Physiological needs

41. Match the items in List I with those in List II and select the correct answer using the codes given below:
List I: (Theorist)
P. Freud
Q. Jung
R. Maslow
S. Eysenck
List II: (Core Concept)
1. Hierarchy of Needs
2. Introversion-Extraversion
3. Psychoanalysis (Id, Ego, Superego)
4. Dimensions of Personality
(A) P-3, Q-2, R-1, S-4
(B) P-1, Q-4, R-3, S-2
(C) P-3, Q-4, R-1, S-2
(D) P-2, Q-3, R-4, S-1

42. Read the following statements regarding motives and choose the correct option:
Statement I: Primary motives are unlearned and common to both humans and animals.
Statement II: Secondary motives are also known as psychogenic motives.
(A) Statement I is correct, but Statement II is incorrect.
(B) Statement I is incorrect, but Statement II is correct.
(C) Both Statement I and Statement II are correct.
(D) Both Statement I and Statement II are incorrect.

43. Arousal theory suggests that people are motivated to:
(A) Maintain a minimal level of stimulation at all times.
(B) Reduction of all physiological drives to zero.
(C) Instant achievement of personal self-actualization.
(D) Maintenance of optimal stimulation levels.

44. Which of the following pairs is correctly matched regarding McClelland's motives?
(A) n-Ach — Desire to avoid social interaction
(B) n-Pow — Desire to influence or control others
(C) n-Aff — Desire to achieve excellence for its own sake

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27. Which of the following statements about Carl Jung's personality types is incorrect?
(A) Introverts tend to be withdrawn and interested in their own ideas.
(B) Extroverts are typically outgoing and socially oriented.
(C) The distinction is based on the direction of psychic energy (libido).
(D) Jung believed that people are exclusively 100% introvert or 100% extrovert.

28. Read the following assertion and reason and choose the correct option:
Assertion (A): The 'Id' operates according to the pleasure principle.
Reason (R): It seeks immediate gratification of all instinctual drives without regard for reality.
(A) Both A and R are true and R is the correct explanation of A.
(B) Both A and R are true but R is not the correct explanation of A.
(C) A is true but R is false.
(D) A is false but R is true.

29. Which of the following pairs is correctly matched according to Eysenck's Type Theory?
(A) Neuroticism — High emotional stability
(B) Psychoticism — High empathy and cooperation
(C) Introversion — Preference for quiet, solitary activities
(D) Extraversion — Low sociability and reserved nature

30. A person who is very helpful, trusting, and cooperative would likely score high on which dimension of the Big Five model?
(A) Openness
(B) Conscientiousness
(C) Neuroticism
(D) Agreeableness

31. Match the items in List I with those in List II and select the correct answer using the codes given below:
List I: (Big Five Trait)
P. Openness
Q. Conscientiousness
R. Extraversion
S. Neuroticism
List II: (Characterization)
1. Organized, dependable, disciplined
2. Emotional instability and anxiety
3. Imaginative, curious, open to new ideas
4. Sociable, talkative, assertive
(A) P-3, Q-1, R-4, S-2
(B) P-1, Q-3, R-2, S-4
(C) P-4, Q-2, R-1, S-3
(D) P-2, Q-4, R-3, S-1

32. Read the following statements regarding Freud's structures of personality and choose the correct option:
Statement I: The 'Ego' acts as a mediator between the 'Id' and the 'Superego'.
Statement II: The 'Superego' represents the internalized moral standards of society.
(A) Statement I is correct, but Statement II is incorrect.
(B) Statement I is incorrect, but Statement II is correct.
(C) Both Statement I and Statement II are correct.
(D) Both Statement I and Statement II are incorrect.

33. When a child uses a single word like "Up" to mean "Pick me up," it is known as:
(A) Babbling
(B) Holophrastic speech
(C) Telegraphic speech
(D) Syntax

34. Which aspect of motivation describes the willingness to keep working toward a goal despite obstacles?
(A) Persistence
(B) Direction
(C) Energization
(D) Intensity

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35. Consider the following aspects of Chomsky's Nativist theory:
I. Children are born with a Language Acquisition Device (LAD).
II. Universal Grammar is an innate set of rules common to all languages.
III. Language is learned strictly through rewards and punishments.
Which of the statements given above are correct?
(A) I and II only
(B) II and III only

(A) Id
(B) Ego
(C) Superego
(D) Libido

55. Read the following statements regarding motivation theories and choose the correct option:
Statement I: Maslow's theory is often criticized for its lack of empirical evidence and cultural bias.
Statement II: Herzberg's theory suggests that motivators are intrinsic to the job itself.
(A) Statement I is correct, but Statement II is incorrect.
(B) Statement I is incorrect, but Statement II is correct.
(C) Both Statement I and Statement II are correct.
(D) Both Statement I and Statement II are incorrect.

56. Which criterion of motivation focuses on the goal-oriented nature of the behavior?
(A) Direction
(B) Energization
(C) Intensity
(D) Homeostasis

57. An individual who prefers reading a book alone rather than attending a crowded party is exhibiting traits of:
(A) Extroversion
(B) Neuroticism
(C) Introversion
(D) Conscientiousness

58. Which of the following is a correct statement about the Nativist theory of language?
(A) Biological predisposition to language learning
(B) Environmental learning through imitation and habit
(C) It posits that the environment is the only factor in language acquisition.
(D) Rejection of the universal grammar concept

59. Achievement motivation can be defined as:
(A) The biological drive to seek pleasure and avoid pain.
(B) The social need to belong to a specific peer group.
(C) The physical urge to consume essential food and water.
(D) The drive to reach high excellence standards.

60. Which of the following is the most appropriate description of a 'Self-actualized' person?
(A) Someone focused solely on the accumulation of wealth.
(B) Someone who has fulfilled their maximum potential.
(C) Someone constantly worried about physical safety.
(D) Someone who lacks any sense of social responsibility.

61. Read the following statements regarding Jung's personality types and choose the correct option:
Statement I: Extraverts, according to Jung, are primarily focused on the subjective world of feelings.
Statement II: Introverts are often reserved and cautious in social settings.
(A) Statement I is correct, but Statement II is incorrect.
(B) Statement I is incorrect, but Statement II is correct.
(C) Both Statement I and Statement II are correct.
(D) Both Statement I and Statement II are incorrect.

62. In Eysenck's theory, the dimension 'Psychoticism' refers to:
(A) The relative degree of internal emotional stability.
(B) The level of sociability and talkativeness.
(C) The openness to new aesthetic experiences.
(D) Tendency toward aggressive or cold behavior.

63. Which of the following is NOT one of the Big Five personality traits?
(A) Narcissism
(B) Openness
(C) Extraversion
(D) Conscientiousness

64. Which of the following pairs is correctly matched regarding Maslow's hierarchy?
(A) Safety — Need for social status

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(B) Belongingness — Friendship and intimacy
(C) Esteem — Basic hunger and thirst
(D) Self-actualization — Financial stability

65. A child who is beginning to use grammatical markers and full sentences is likely in which stage?
(A) One-word stage
(B) Full sentences stage
(C) Two-word stage
(D) Telegraphic stage

66. Which theory of language development emphasizes the role of 'Skinnerian' operant conditioning?
(A) Learning Theory
(B) Nativist Theory
(C) Cognitive Theory
(D) Humanistic Theory

67. If a student studies harder after receiving a low grade, which criterion of motivation is being demonstrated by the increase in effort?
(A) Direction
(B) Energization
(C) Intensity
(D) Instinct

68. Who added 'Psychoticism' as the third dimension to the personality theory originally featuring Introversion and Neuroticism?
(A) Sigmund Freud
(B) Carl Jung
(C) David McClelland
(D) Hans Eysenck

69. Which of the following is NOT an example of a biological motive?
(A) Hunger
(B) Thirst
(C) Curiosity
(D) Sex

70. The 'Superego' is primarily concerned with:
(A) Practicality and reality
(B) Morality and ideals
(C) Immediate pleasure
(D) Biological survival

71. Which of the following represents the correct chronological order of language development stages?
(A) Cooing, Babbling, Holophrase, Telegraphic
(B) Babbling, Cooing, Telegraphic, Holophrase
(C) Holophrase, Cooing, Babbling, Telegraphic
(D) Cooing, Holophrase, Babbling, Telegraphic

72. According to Herzberg, 'Hygiene Factors' are:
(A) Extrinsic factors in the job environment.
(B) Factors leading to higher work motivation.
(C) Intrinsic factors related to the work itself.
(D) Factors resulting in personal self-actualization.

73. Which of the following is an incorrect statement about McClelland's theory?
(A) n-Ach stands for need for Achievement.
(B) n-Aff stands for need for Affiliation.
(C) Everyone has equal levels of all three needs.
(D) n-Pow stands for need for Power.

74. A person who is highly organized, careful, and disciplined would score high on:
(A) Conscientiousness
(B) Agreeableness
(C) Openness
(D) Extraversion

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75. Which of the following pairs is correctly matched regarding Freud's personality components?
(A) Id — Internalized morality
(B) Ego — Primitive biological drives
(C) Libido — The reality principle
(D) Superego — Morality based principle

76. Which of the following is NOT a characteristic of motivated behavior?
(A) It is goal-directed in nature.
(B) It is an aimless and random process.
(C) It is persistent over time.
(D) It is energized by internal states.

77. The term 'holophrase' refers to:
(A) The combination of two words.
(B) A string of nonsense syllables.
(C) A single word used to convey a complete thought.
(D) A complex sentence with multiple clauses.

78. Which of the following is an exception to the biological/primary motives?
(A) Sleep
(B) Air
(C) Thirst
(D) Achievement

79. What is the 'Most Appropriate' reason why Chomsky argued against the Learning Theory of language?
(A) Insufficient reinforcement for complex rules.
(B) Slow language learning in early development.
(C) Animal imitation of complex human speech.
(D) Language usage for basic physical survival.

80. Read the following statements regarding the nature of motivation and choose the correct option:
Statement I: Motivation is always a visible physical action.
Statement II: Motivation can be inferred from the behavior of an individual.
(A) Statement I is correct, but Statement II is incorrect.
(B) Statement I is incorrect, but Statement II is correct.
(C) Both Statement I and Statement II are correct.
(D) Both Statement I and Statement II are incorrect.

81. Which theorist suggested that personality can be understood through two primary dimensions: Extraversion-Introversion and Stability-Instability?
(A) McCrae
(B) Eysenck
(C) Jung
(D) Freud

82. Which of the following is a correct statement regarding 'Safety Needs' in Maslow's theory?
(A) Needs for security and protection.
(B) Needs for essential food and water.
(C) Needs for highest level of fulfillment.
(D) Needs for social approval in childhood.

83. Which of the following is an incorrect statement regarding 'Telegraphic Speech'?
(A) It lacks function words like 'is' and 'the'.
(B) It consists mainly of content words like nouns and verbs.
(C) It usually begins around the age of 2.5 to 3 years.
(D) It is more complex than the two-word stage.

84. If an employee is motivated by the work itself and the responsibility it brings, this aligns with:
(A) Herzberg's Hygiene Factors
(B) Hull's Drive Reduction
(C) Freud's Id
(D) Herzberg's Motivator Factors

85. Which of the following pairs is correctly matched regarding 'Secondary Motives'?
(A) Power — Need for food
(B) Achievement — Need for safety
(C) Affiliation — Being with others
(D) Curiosity — Need for sleep

86. Which of the following is an incorrect pair of the 'Big Five' traits and their opposites?
(A) Extraversion — Introversion
(B) Openness — Agreeableness
(C) Conscientiousness — Undirectedness/ Impulsivity
(D) Neuroticism — Emotional Stability

87. Nature of motivation is best described as:
(A) Static and unchanging.
(B) Purely environmental.
(C) Purely genetic.
(D) Dynamic and fluctuating.

88. Which of the following is NOT an element of Eysenck's three-factor model?
(A) Agreeableness
(B) Extraversion
(C) Neuroticism
(D) Psychoticism

89. Which is the best description of 'Drive' in Clark Hull's theory?
(A) A cognitive plan for future goals.
(B) A social pressure for peer success.
(C) A tension state from biological needs.
(D) An instinctual reflex to the world.

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27. (D) Jung believed that people are exclusively 100% introvert or 100% extrovert.
Carl Jung's theory of personality focuses on the direction of psychic energy, distinguishing between introversion and extraversion. While individuals typically show a preference for one over the other, Jung did not believe that people are exclusively one type. Instead, most individuals possess a mix of both traits, with one being more dominant in their conscious life while the other remains.

28. (A) Both A and R are true and R is the correct explanation of A.
The Id is the most primitive part of the personality and is present from birth. It operates entirely on the pleasure principle, seeking immediate gratification for all biological drives and instinctual urges. It does not consider social rules, logic, or reality. Its primary goal is to resolve the tension created by biological needs through the most direct and immediate means.

29. (C) Introversion — Preference for quiet, solitary activities
In Hans Eysenck's theory, introversion is characterized by a preference for quiet, solitary activities and a tendency to be reserved in social situations. This dimension reflects an individual's level of sociability and their reaction to external stimuli. Unlike neuroticism, which involves emotional instability, or psychoticism, which involves aggression, introversion focuses on the internal direction of an individual's social energy.

30. (D) Agreeableness
Agreeableness is a dimension of the Big Five model that reflects an individual's tendency to be cooperative, compassionate, and trusting toward others. People scoring high in this trait are often helpful and value social harmony. This dimension contrasts with those who are more competitive or suspicious. It is a key indicator of how a person navigates their interpersonal relationships.

31. (A) P-3, Q-1, R-4, S-2
Openness involves being imaginative and curious about new ideas. Conscientiousness is characterized by being organized, dependable, and disciplined. Extraversion reflects a sociable, talkative, and assertive nature in social settings. Neuroticism indicates emotional instability and a tendency toward anxiety. These five dimensions provide a comprehensive framework for understanding the fundamental traits that make up human personality across various cultural contexts.

32. (C) Both Statement I and Statement II are correct.
Freud's personality model includes the Ego, which functions based on the reality principle and mediates between the conflicting demands of the Id and the Superego. The Superego acts as the moral compass, representing the internalized standards and values of society. Together, these structures interact to determine behavior, balancing primal desires with logical constraints and ethical considerations in everyday life.

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33. (B) Holophrastic speech
Holophrastic speech occurs when a child uses a single word to convey a complex thought or a full sentence. For example, a child saying "Up" might mean "Please pick me up." This stage demonstrates that the child understands the concept of communication and uses the limited vocabulary they possess to express their needs and observations to the caregivers around.

34. (A) Persistence
Persistence is the motivational criterion that describes an individual's willingness to continue working toward a goal, even when faced with obstacles or failure. It reflects the duration of the motivated behavior and the stamina required to sustain effort over time. High persistence is often the determining factor in achieving long-term success, as it ensures that the individual remains focused.

35. (A) I and II only
Chomsky's Nativist theory posits that children are born with a Language Acquisition Device and an innate understanding of Universal Grammar. These biological mechanisms allow for the rapid learning of any language they are exposed to. This theory explicitly rejects the behaviorist view that language is learned solely through reinforcement, arguing instead that the human brain is specialized for linguistic development.

36. (D) Reflective internal nature
In Jung's theory, extroverts are characterized by their focus on the external world and social

ANSWERS

1. (B) A process that guides and maintains behavior
Motivation serves as the internal engine that initiates, directs, and sustains goal-oriented behaviors. It is fundamentally a psychological process involving biological, emotional, social, and cognitive forces. This dynamic state ensures that an individual remains active until a specific need is met or a goal is achieved, representing the internal drive necessary for persistent human action and behavior.

2. (A) The physiological drive to maintain body temperature.
Biological motives, also known as primary motives, are essential for the survival of an organism. These drives arise from basic physiological needs that must be satisfied to maintain life. Maintaining body temperature is a critical biological requirement, as extreme fluctuations can lead to physical harm or death. Unlike psychological motives, these are unlearned and are shared across species.

3. (A) 2, 1, 3, 4
The logical sequence of motivated behavior begins with energization, providing the arousal to act. Next, direction specifies the goal toward which the behavior is aimed. Intensity determines the strength or vigor of the effort applied during the activity. Finally, persistence ensures the behavior continues over time until the desired outcome is achieved, completing the motivation action cycle in a structured manner.

4. (D) Need for relief from thirst
Psychological or secondary motives are learned needs that develop through social interaction and cultural experiences. Examples include the drive for achievement, social affiliation, and power. In contrast, the need for relief from thirst is a primary biological motive essential for survival. It is triggered by physiological deficits and is unlearned, distinguishing it from higher-level psychological needs in humans.

5. (A) I and II only
Energization is a fundamental criterion of motivation that refers to the initial arousal or activation of behavior. It provides the essential psychological and physical strength required to start an action. While it initiates the process, direction specifically ensures the behavior focuses on a goal. Therefore, energization focuses on the internal state of arousal and the initiation of goal-oriented activity.

6. (C) Both Statement I and Statement II are correct.
Intensity and persistence are vital components of motivated behavior. Intensity represents the magnitude of effort or the vigor with which a person pursues a task. Persistence describes the duration or sustainability of the effort over time, even when obstacles arise. Both criteria are essential for evaluating the strength and commitment of an individual toward achieving a specific behavioral objective.

7. (D) To maintain a state of biological homeostasis.
Clark Hull's Drive Reduction Theory posits that biological needs create internal states of tension known as drives. The primary goal of motivated behavior is to reduce this tension and return the body to a state of homeostasis. Homeostasis represents the stable internal physiological balance necessary for survival, ensuring that physical needs like hunger and thirst are consistently satisfied.

8. (C) A is true but R is false.
Instinct theory defines motivation as being driven by innate, biological patterns of behavior that are universal within a species. These instincts are unlearned and genetically programmed rather than acquired through environmental conditioning or social observation. While the theory highlights the biological basis of behavior, it is criticized for failing to account for the complex role of learning in human motivation.

9. (C) Optimal Arousal — Performance is at its peak
Arousal theory suggests that individuals are motivated to maintain an optimal level of

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stimulation. Performance on tasks is generally at its peak when arousal is neither too high nor too low. This optimal level varies depending on task complexity; however, finding the perfect balance ensures maximum efficiency and focus. Extremes in arousal typically lead to decreased performance or anxiety.

10. (A) Persistence
Persistence is the aspect of motivated behavior that involves continuing an activity despite difficulties, exhaustion, or long durations. It demonstrates the individual's commitment to reaching a goal over an extended period. In academic settings, studying for many hours despite being tired illustrates high persistence, as the individual refuses to stop until the requirement for passing the exam is addressed.

11. (A) P-3, Q-4, R-2, S-1
Primary motives like sleep are biological and essential for survival. Secondary motives, such as the need for affiliation, are learned through social interaction. Regarding criteria, intensity refers to the physical strength or vigor applied to an effort. Direction involves making specific choices, such as selecting a career path, which guides behavior toward a particular goal or long-term objective.

12. (B) Homeostasis
Homeostasis is a fundamental physiological concept referring to the body's ability to maintain a stable internal environment. This state of balance is critical for survival and involves regulating variables such as temperature, fluid levels, and energy. When an imbalance occurs, the body experiences a drive to engage in behaviors that restore this equilibrium, ensuring continued health and biological functioning.

13. (C) David McClelland
David McClelland is a prominent psychologist known for his research on achievement motivation. He proposed that individuals are driven by three distinct needs: achievement, power, and affiliation. His work emphasizes how the desire for excellence and the pursuit of challenging goals influence human behavior. This theory suggests that these needs are primarily learned through cultural and social life experiences.

14. (D) Achievement recognition
In Herzberg's Two-Factor Theory, motivators are intrinsic factors that lead to job satisfaction and higher performance. Achievement recognition is a classic motivator because it provides a sense of personal growth and accomplishment. Unlike hygiene factors, such as salary or working conditions which only prevent dissatisfaction, motivators actively encourage employees to excel and feel more deeply engaged with their work.

15. (C) III only
Maslow's Hierarchy of Needs identifies physiological needs as the most basic and fundamental level that must be addressed first. These include essential requirements for human survival, such as food, water, air, and sleep. According to the theory, an individual cannot focus on higher-level needs like safety or belonging until these primary biological demands are sufficiently met by the person.

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16. (B) It is a deficiency-based motive similar to hunger.
Self-actualization represents the highest level of Maslow's hierarchy and is classified as a growth need rather than a deficiency need. Deficiency needs, such as hunger or safety, arise from a lack of something essential. In contrast, self-actualization focuses on the realization of personal potential and self-fulfillment. It is an ongoing process of becoming the best version of oneself.

17. (B) Safety needs
Safety needs in Maslow's hierarchy include the desire for security, stability, and protection from physical or emotional harm. Seeking a stable job with a pension plan is a direct expression of these needs, as it provides financial security and long-term predictability. Once basic physiological requirements are met, individuals prioritize establishing a safe environment to ensure their future well-being and comfort.

18. (A) Both A and R are true and R is the correct explanation of A.
Individuals with high achievement motivation typically prefer tasks of intermediate difficulty. These tasks are challenging enough to provide a sense of accomplishment upon success but realistic enough to avoid a high probability

of failure. This balance allows individuals to take personal responsibility for the outcome while receiving meaningful feedback on their competence, which is essential for satisfying achievement needs.

19. (C) Both Statement I and Statement II are correct.
Herzberg's theory distinguishes between hygiene factors, which prevent dissatisfaction, and motivators, which encourage positive satisfaction. Simultaneously, McClelland's theory identifies three core psychological needs: achievement, power, and affiliation. Both theories provide valuable insights into human motivation within organizational and social contexts. They emphasize that motivation is multifaceted, involving both environmental conditions and internal psychological drives that guide individual behavior.

20. (D) Holophrastic stage — Multi-word complex sentences
Language development progresses through several distinct stages. Cooing involves vowel sounds, while babbling adds consonant-vowel combinations. Telegraphic speech uses essential words to convey meaning. However, the holophrastic stage involves using a single word to represent a whole thought or sentence. It does not involve multi-word complex sentences, which only emerge much later as the child masters grammar and syntactic rules.

21. (A) P-3, Q-4, R-1, S-2
The prelinguistic stage includes early vocalizations like cooing and babbling. The one-word stage uses holophrases, such as saying "juice" to mean "I want juice." The two-word stage involves basic combinations like "milk gone" to express a specific idea. Finally, the full sentences stage is characterized by the use of complex grammar and more sophisticated language structures to communicate effectively.

22. (B) Language Acquisition Device
The Language Acquisition Device, or LAD, is a theoretical component of the mind proposed by Noam Chomsky. It suggests that humans are born with an innate biological capacity to learn language. This internal mechanism contains the universal rules of grammar, allowing children to rapidly acquire their native language by simply being exposed to it, regardless of the language's specific complexity.

23. (D) Telegraphic speech
Telegraphic speech is a stage of language development where children use short, concise phrases consisting mainly of content words like nouns and verbs. Phrases such as "Go car" lack grammatical markers like articles or prepositions but effectively communicate a clear message. This stage typically follows the two-word stage and represents an increasing ability to structure thoughts using basic syntactic patterns.

24. (A) Innate biological blueprint
The Learning Theory of language development, championed by B.F. Skinner, emphasizes that language is acquired through environmental factors. It focuses on the reinforcement of verbal behavior, imitation of adults, and the shaping of linguistic habits. It specifically rejects the idea of an innate biological blueprint or preprogrammed mechanism, arguing instead that children learn to speak through experience and feedback.

25. (A) I and II only
The prelinguistic stage encompasses all vocalizations and communication attempts that occur before a child produces their first recognizable word. This period includes cooing and babbling, which are essential for developing vocal control. While holophrases involve using a single word to communicate, they belong to a later stage of development, as the child has already begun using actual linguistic symbols.

26. (A) A stable pattern of thoughts, feelings, and actions
Personality is defined as the characteristic and stable pattern of thoughts, feelings, and behaviors that distinguish one individual from another. It represents the consistency of a person's reactions across different situations and over time. Unlike temporary moods or outward physical traits, personality encompasses deep-seated psychological structures that influence how a person interacts with the world and perceives personal experiences.

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90. Read the following statements regarding Jung's personality types and choose the correct option:
Statement I: Jung's introverts are usually more comfortable in large social gatherings.
Statement II: Jung's extroverts gain energy from being around other people.
(A) Statement I is correct, but Statement II is incorrect.
(B) Statement I is incorrect, but Statement II is correct.
(C) Both Statement I and Statement II are correct.
(D) Both Statement I and Statement II are incorrect.

91. The desire to establish, maintain, or restore a positive affective relationship with another person is the:
(A) Need for Power
(B) Need for Achievement
(C) Need for Autonomy
(D) Need for Affiliation

92. Which of the following is a correct statement regarding 'Openness' in the Big Five model?
(A) Measurement of an individual's anxiety.
(B) Curiosity and interest in variety.
(C) Outgoing and extroverted behavior.
(D) Verbosity and total social talk.

93. Which of the following is an incorrect statement regarding the 'Id'?
(A) It is present at birth.
(B) It is entirely unconscious.
(C) It is the rational part of personality.
(D) It contains basic biological urges.

94. A manager who uses rewards and punishments to control employee behavior is applying principles from which theory?
(A) Nativist Theory
(B) Maslow's Self-actualization
(C) Jung's Personality Theory
(D) Learning Theory

95. Which of the following pairs is correctly matched regarding language acquisition?
(A) Skinner — Operant Conditioning
(B) Skinner — Universal Grammar
(C) Chomsky — Reinforcement
(D) Chomsky — Imitation

96. Which of the following is an incorrect pair regarding Criteria of Motivated Behavior?
(A) Energization — Arousal
(B) Intensity — Lack of effort
(C) Direction — Goal-oriented
(D) Persistence — Time duration

97. The innate, biological predispositions to act in specific ways are called:
(A) Habits
(B) Instincts
(C) Drives
(D) Incentives

98. Which of the following is NOT a component of the Big Five model?
(A) Psychoticism
(B) Extraversion
(C) Agreeableness
(D) Conscientiousness

99. Which of the following represents the 'Most Appropriate' sequence of Maslow's hierarchy from the perspective of human development?
(A) Higher needs satisfied before the lower.
(B) All needs satisfied at the same time.
(C) Lower needs prioritized for survival.
(D) Self-actualization is the first need to be met.

100. Read the following statements regarding personality and language development and choose the correct option:
Statement I: Personality is defined as the characteristic way in which an individual thinks, feels, and behaves.
Statement II: Language development follows a predictable sequence across cultures.
(A) Statement I is correct, but Statement II is incorrect.
(B) Statement I is incorrect, but Statement II is correct.
(C) Both Statement I and Statement II are correct.
(D) Both Statement I and Statement II are incorrect.

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environment. They are typically outgoing, assertive, and gain energy from interacting with others. A reflective and internal nature is actually a hallmark of introversion, where psychic energy is directed inward toward subjective thoughts and feelings, rather than outward toward social groups and external activities.

37. (C) They are primarily learned through social interaction and experience.
Psychological or secondary motives are not based on biological survival but are developed through social interaction, education, and cultural experiences. These motives, such as the need for achievement or status, vary significantly between individuals and societies. Unlike primary motives, they are learned over time and are influenced by the environment, personal values, and the specific social context of an individual.

38. (A) Both A and R are true and R is the correct explanation of A.
Hull's Drive Reduction Theory suggests that biological needs create an internal state of tension known as a drive. This drive motivates the organism to engage in behaviors that satisfy the need and reduce the tension. By doing so, the organism restores internal balance. The theory highlights how biological requirements directly influence behavioral patterns through the mechanism of drive reduction.

39. (D) Direct correlation with peak performance
Intensity in motivation refers to the vigor and strength of a response. However, it does not have a simple direct correlation with peak performance. According to the Yerkes-Dodson law, optimal performance occurs at a moderate level of arousal or intensity. Too much intensity can lead to anxiety and decreased efficiency, especially when an individual is performing complex or difficult tasks.

40. (A) Esteem needs
Esteem needs in Maslow's hierarchy involve the desire for respect, self-esteem, social status, and recognition from others. These needs appear after a person feels safe and has established social connections. Satisfying these needs leads to feelings of self-confidence and worth. Individuals at this level are motivated to achieve success and gain the approval and appreciation of their peers.

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41. (A) P-3, Q-2, R-1, S-4
Sigmund Freud developed psychoanalysis, focusing on the Id, Ego, and Superego. Carl Jung is associated with the introversion-extraversion distinction. Abraham Maslow created the Hierarchy of Needs to describe human motivation. Hans Eysenck identified major dimensions of personality, including neuroticism and extraversion. Each theorist contributed significantly to our understanding of how internal structures and traits shape individual human behavior.

42. (C) Both Statement I and Statement II are correct.
Primary motives are unlearned, biological drives common to both humans and animals, such as hunger and thirst. Secondary motives, also known as psychogenic motives, are learned through social experiences and are specific to human behavior, such as the need for achievement. Both types of motives play essential roles in directing behavior, though they originate from different biological and social sources.

43. (D) Maintenance of optimal stimulation levels.
Arousal theory posits that individuals are motivated to maintain an optimal level of stimulation. This means people seek out activities that prevent boredom when arousal is too low and engage in relaxing activities when arousal is too high. The goal is to reach a state of stimulation that allows for peak performance and a sense of psychological well-being.

44. (B) n-Pow — Desire to influence or control others
In McClelland's theory, the need for power (n-Pow) is the desire to influence, coach, or control others and to have an impact on one's environment. This differs from the need for achievement, which focuses on personal excellence, and the need for affiliation, which focuses on maintaining warm interpersonal relationships. Each of these three needs motivates behavior in distinct social settings.

45. (A) I and II only
Achievement and affiliation are classic examples of secondary or psychological motives because they are learned through social and cultural experiences. They are not required for immediate biological survival but are essential for psychological well-being and social functioning.

Thirst, however, is a primary biological motive triggered by physical deficits in the body, making it an unlearned and universal drive for survival.

46. (D) Two-word stage
The two-word stage typically begins around the age of eighteen to twenty-four months. At this point, children start combining two words to express basic ideas, such as "Dada come" or "more juice." This stage is a critical transition between using single holophrases and developing more complex telegraphic speech, marking the beginning of the child's ability to utilize basic syntactic patterns.

47. (A) All individuals eventually reach self-actualization.
Maslow's theory suggests that self-actualization is the ultimate goal of human development, but he noted that not everyone reaches this level. Many people remain focused on satisfying lower-level needs like safety or esteem. While the hierarchy provides a framework for growth, personal and environmental obstacles can prevent an individual from fully realizing their potential and achieving a state of self-actualization.

48. (C) A is true but R is false.
Personality is characterized by the stability and consistency of an individual's behavior across different situations and over time. While the environment influences behavior, personality traits are not entirely determined by external factors, nor do they change every hour. Traits are relatively enduring qualities that provide a predictable pattern to a person's actions, distinguishing them from temporary emotional states or moods.

49. (B) Challenging work
According to Herzberg's Two-Factor Theory, job satisfaction is primarily driven by motivators, which are intrinsic to the work itself. Challenging work, responsibility, and personal growth are examples of factors that lead to genuine satisfaction. Hygiene factors, such as company policy or supervision, can only prevent dissatisfaction; they do not possess the power to truly motivate employees toward higher performance.

50. (A) Prone to anxiety and emotional instability.
In the Big Five model, individuals who score high on neuroticism tend to experience more emotional instability and are more prone to feelings of anxiety, depression, and vulnerability. They often react more strongly to stress and may struggle to maintain emotional balance. This trait contrasts with emotional stability, where individuals remain calm and even-tempered even when facing challenging or difficult circumstances.

51. (A) P-4, Q-1, R-3, S-2
Cooing involves making simple vowel-like sounds. Babbling occurs when the infant combines consonants and vowels into repetitive syllables. A holophrase is a single word used to express a complete thought or desire. Telegraphic speech consists of two-word sentences that convey meaning without function words. These stages represent the universal progression of language acquisition as children develop their vocal and cognitive skills.

52. (D) Freud — Self-actualization
Psychology includes various theorists focusing on different aspects of human behavior. Carl Jung studied introversion and extraversion, while Hans Eysenck researched psychoticism. McCrae and Costa developed the Big Five model. However, Abraham Maslow is the theorist primarily associated with self-actualization and the hierarchy of needs. Sigmund Freud focused on the unconscious mind and the structures of Id, Ego, and Superego.

53. (A) 3-2-5-1-4
Maslow's hierarchy of needs is structured from the most basic survival needs at the bottom to the highest growth needs at the top. The correct order begins with physiological needs, followed by safety, then love and belonging. Once these are met, the individual seeks esteem, and finally, self-actualization. This progression reflects the priority of needs based on their necessity for survival.

54. (B) Ego
The Ego is the rational and conscious part of the personality that operates according to the reality principle. It acts as the executive, making decisions and finding realistic ways to satisfy the

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Id's basic desires while adhering to the moral constraints of the Superego. Its primary role is to balance internal instinctual drives with the demands of the external world.

55. (C) Both Statement I and Statement II are correct.
Maslow's theory is frequently criticized because it is difficult to test empirically and may reflect Western cultural values. In contrast, Herzberg's theory focuses on the workplace, suggesting that true motivators are intrinsic to the job itself, such as the work's nature and the opportunity for growth. Both theories provide important frameworks for understanding what drives human behavior in different contexts.

56. (A) Direction
Direction is the criterion of motivated behavior that refers to its goal-oriented nature. It describes how behavior is focused and guided toward specific outcomes or objectives. While energization provides the arousal to act, direction ensures that the energy is used purposefully. This aspect of motivation explains why individuals choose one particular activity over others to satisfy their specific internal needs.

57. (C) Introversion
Introversion is a personality trait characterized by a preference for solitary activities and a tendency to gain energy from internal reflection rather than social interaction. An individual who chooses to read a book alone instead of attending a party is demonstrating a typical introverted preference for low-stimulation environments. This trait involves directing psychic energy inward toward subjective thoughts and personal experiences.

58. (A) Biological predisposition to language learning
The Nativist theory of language, proposed by Noam Chomsky, emphasizes that humans have an innate, biological predisposition to acquire language. It suggests that the brain contains specialized mechanisms, like the Language Acquisition Device, that allow children to understand universal grammar rules naturally. This perspective argues that environmental factors alone cannot explain the speed and complexity with which children master their native tongue.

59. (D) The drive to reach high excellence standards.
Achievement motivation is the psychological drive to excel, overcome obstacles, and meet high standards of performance. It involves a desire for significant accomplishment and the mastery of skills or ideas. Individuals with high achievement motivation are typically attracted to challenging tasks where they can demonstrate their competence and receive feedback, pushing themselves to reach the highest possible levels of excellence.

60. (B) Someone who has fulfilled their maximum potential.
A self-actualized person is someone who has reached the highest level of Maslow's hierarchy by fulfilling their maximum personal potential. They are characterized by self-acceptance, creativity, and a strong sense of purpose. This state involves going beyond basic survival and social needs to achieve true self-fulfillment. Such individuals are often motivated by internal growth rather than external rewards or social approval.

61. (B) Statement I is incorrect, but Statement II is correct.
According to Jung, extraverts are oriented toward the external world and social environment, while introverts are focused on their internal thoughts and feelings. Introverts tend to be more reserved and cautious in social settings, often finding large gatherings draining. Therefore, the statement that extraverts focus on the subjective world of feelings is incorrect, as that description actually applies to introverts.

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62. (D) Tendency toward aggressive or cold behavior.
In Hans Eysenck's three-factor model, psychoticism is a dimension that describes individuals who may be aggressive, cold, egocentric, and impersonal. People scoring high on this dimension often show a lack of empathy and may be less cooperative in social situations. It is distinct from extraversion and neuroticism, focusing instead on traits related to social non-conformity and a tough-minded attitude.

63. (A) Narcissism
The Big Five model of personality includes the traits of openness, conscientiousness, extraversion, agreeableness, and neuroticism.

(B) 2 and 3 only
(C) 1 and 3 only
(D) 1 only

23. Read the scenario described below and answer the question that follows:
A student prepares intensely for a competitive exam and feels energized by the challenge. This type of stress is known as:
(A) Chronic distress
(B) Psychosomatic disorder
(C) Cognitive exhaustion
(D) Eustress

24. Match the Acts and Schemes in List I with their target provisions in List II and select the correct answer using the codes given below:
List I: Scheme/Act
P. NSAP
Q. NDPS Act
R. JJ Act 2015
S. Senior Citizen Act 2007
List II: Target/Provision
1. Regulation of drug trafficking
2. Maintenance and welfare of parents
3. Social assistance including old age pension
4. Care and protection of children in conflict with law
(A) P-3, Q-1, R-4, S-2
(B) P-1, Q-3, R-2, S-4
(C) P-4, Q-2, R-1, S-3
(D) P-2, Q-4, R-3, S-1

25. The following question consists of two statements—Assertion (A) and Reason (R). Answer the question by selecting the appropriate option.
Assertion (A): Selye's General Adaptation Syndrome describes the body's short-term and long-term reactions to stress.
Reason (R): The 'Resistance' stage is where the body's resources are completely depleted, leading to illness.
(A) Both A and R are true and R is the correct explanation of A.
(B) Both A and R are true but R is not the correct explanation of A.
(C) A is true but R is false.
(D) A is false but R is true.

26. Which of the following is the standard definition of the 'elderly' or 'aged' population in the context of Indian social statistics and policy?
(A) Persons aged 50 years and above
(B) Persons aged 55 years and above
(C) Persons aged 60 years and above
(D) Persons aged 65 years and above

27. What is the primary focus of the National Social Assistance Programme (NSAP) in India regarding the elderly?
(A) Providing free higher education for all senior citizens.
(B) Constructing high-end, luxury-style retirement resorts.
(C) Mandating permanent employment in the government sector.
(D) Providing financial assistance through old age pensions.

28. Consider the following statements regarding juvenile delinquency:
1. It refers to criminal behavior committed by individuals below the legal age of adulthood.
2. Neighborhood and community environment play a role in its development.
3. It is exclusively caused by genetic factors with no social influence.
Which of the statements given above are correct?
(A) 1 and 2 only
(B) 2 and 3 only
(C) 1 and 3 only
(D) 2 only

29. Which of the following is a correct statement regarding the 'Exhaustion' stage of the General Adaptation Syndrome?
(A) The body enters a state of high physiological arousal.
(B) The body successfully adapts to the stressor permanently.
(C) Continued stress leads to organ system breakdown.
(D) It is the initial bodily reaction to a perceived threat.

30. Match the substances in List I with their classifications in List II and select the correct answer using the codes given below:
List I: Condition
P. Opioids

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known as motivators, which relate to the nature of the work and personal accomplishment.

73. (C) Everyone has equal levels of all three needs.
McClelland's theory identifies three main needs: achievement, power, and affiliation. However, the theory does not suggest that everyone has equal levels of these needs. Instead, individuals have different motivational profiles, with some being more driven by achievement and others by affiliation or power. These variations are shaped by life experiences and cultural background, leading to diverse behavioral patterns.

74. (A) Conscientiousness
Conscientiousness is a dimension of the Big Five model that describes individuals who are organized, careful, and disciplined. High scorers in this trait are typically reliable and plan ahead to achieve their goals. This trait reflects an individual's level of self-control and their ability to follow through on commitments, distinguishing them from those who are more impulsive or disorganized in nature.

75. (D) Superego — Morality based principle
In Freud's model of personality, the Superego is the component that functions based on the morality principle. It incorporates the ethical standards and values of society, guiding the individual to act in ways that are socially and morally acceptable. This contrasts with the Id, which follows the pleasure principle, and the Ego, which operates according to the reality principle.

76. (B) It is an aimless and random process.
Motivated behavior is characterized by being goal-directed, persistent, and energized by internal or external states. It is a purposeful process aimed at achieving a specific objective or satisfying a need. Aimless and random actions lack the necessary direction and persistence that define motivation. Therefore, motivated behavior is always structured toward a result rather than being a sequence of accidents.

77. (C) A single word used to convey a complete thought.
A holophrase is a single word that a child uses to convey a whole thought, desire, or complex meaning during early language development. For example, a child might say "Milk" to mean "I want a glass of milk." This stage shows the child's growing ability to use symbolic language to interact with their environment before they can form full sentences.

78. (D) Achievement
Biological or primary motives, such as sleep, air, and thirst, are essential for physical survival and are unlearned. Achievement, however, is a secondary or psychological motive. It is learned through social interaction and is not necessary for the immediate biological maintenance of the body. While it significantly influences human behavior, it operates on a different level than basic physiological requirements.

79. (A) Insufficient reinforcement for complex rules.
Chomsky argued against the Learning Theory by pointing out that children learn complex grammatical rules far more quickly than could be explained by reinforcement alone. Parents often reinforce the meaning of a child's speech rather than its grammatical correctness, yet children still master syntax perfectly. This suggests that the environment provides insufficient reinforcement for the intricate rules that children eventually master.

80. (B) Statement I is incorrect, but Statement II is correct.
Motivation is an internal psychological process that cannot be seen directly; it is not always a visible physical action. Instead, it is a construct that must be inferred from observing an individual's behavior, including their persistence and the direction of their efforts. While the resulting action is observable, the underlying drive remains an internal state that initiates and maintains behavior.

81. (B) Eysenck
Hans Eysenck proposed that personality can be understood through two primary dimensions: extraversion-introversion and stability-instability (neuroticism). He suggested that these traits have a biological basis related to the nervous system's functioning. Extraversion reflects social orientation, while stability-instability relates to emotional control. This model provided a structured way to measure individual differences in personality using a quantitative and scientific approach.

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100. (C) Both Statement I and Statement II are correct. Personality is consistently defined as the characteristic way an individual thinks, feels, and behaves over time. At the same time, research shows that language development follows a remarkably predictable sequence across different cultures, from cooing to full sentences. Both concepts highlight the combination of stable internal traits and universal developmental patterns that define the human experience throughout the entire lifespan.

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maintain positive affective relationships with others. It involves seeking social acceptance and being part of a group. Individuals with a high need for affiliation prioritize social harmony and interpersonal connections. This motive is essential for human social development and the formation of supportive social networks throughout life.

92. (B) Curiosity and interest in variety.
Openness is a dimension of the Big Five model that reflects an individual's curiosity, imagination, and interest in a variety of experiences. People who score high in this trait are often creative, unconventional, and open to new ideas and aesthetic values. It is a measurement of cognitive flexibility and the willingness to explore unfamiliar territories, rather than social talkativeness or verbosity.

93. (C) It is the rational part of personality.
The Id is the primitive part of the personality that is present at birth and contains basic biological urges. It operates entirely on the pleasure principle and is completely unconscious. However, it is not the rational part of the personality; that role belongs to the Ego, which uses logic and reality to manage the demands of the Id and Superego effectively.

94. (D) Learning Theory
A manager who uses rewards and punishments to influence behavior is applying the principles of Learning Theory, specifically operant conditioning. This approach suggests that behavior is shaped by its consequences. By reinforcing desired actions and penalizing undesirable ones, the manager can control and direct the employees' behavior. This perspective views motivation as being largely driven by external environmental factors and feedback.

95. (A) Skinner — Operant Conditioning
Skinner's theory of language acquisition is based on operant conditioning, where verbal behavior is learned through reinforcement and imitation. This differs from Chomsky's perspective, which emphasizes innate universal grammar and biological predispositions. The correctly matched pair highlights Skinner's focus on the role of the environment and feedback in shaping how children learn to speak and use language in social contexts.

96. (B) Intensity — Lack of effort
Motivated behavior is evaluated through criteria such as energization, direction, intensity, and persistence. Intensity refers to the vigor or strength of the response. Therefore, a lack of effort is the opposite of intensity and cannot be its correct description. Motivated behavior requires a certain level of physical or mental effort to be considered intense, reflecting the individual's commitment to achieving a goal.

97. (B) Instincts
Instincts are innate, biological predispositions to act in specific ways that are characteristic of a species. They are unlearned and automatically triggered by certain stimuli. Early motivation theorists believed that human behavior was primarily driven by these fixed action patterns. While modern psychology recognizes the role of learning, the concept of instincts highlights the importance of our evolutionary biological heritage in behavior.

98. (A) Psychoticism
The Big Five model includes openness, extraversion, agreeableness, conscientiousness, and neuroticism. These traits are considered the fundamental building blocks of personality. Psychoticism is not part of this model; it is a dimension found in Hans Eysenck's three-factor theory. While there is some overlap between different personality theories, each model uses a specific set of traits to categorize individual psychological differences.

99. (C) Lower needs prioritized for survival.
From a human development perspective, Maslow's hierarchy suggests that lower-level needs must be prioritized for survival. An individual must satisfy physiological requirements like food and water before they can focus on safety or social belonging. This sequence ensures that basic biological and security needs are met first, providing a stable foundation for the eventual pursuit of higher-level goals like self-actualization.

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These dimensions are used to provide a comprehensive description of human personality. Narcissism is not one of these five core traits; instead, it is often studied as a specific personality disorder or a distinct trait within the "Dark Triad" of personality research.

64. (B) Belongingness — Friendship and intimacy
In Maslow's hierarchy, belongingness and love needs refer to the desire for social connection, friendship, intimacy, and acceptance within a group. This level of the hierarchy follows physiological and safety needs. Satisfying these needs is essential for emotional well-being. This differs from esteem needs, which focus on status, or safety needs, which focus on protection from harm and environmental stability.

65. (B) Full sentences stage
The stage of using full sentences is reached when a child begins to apply grammatical markers, such as plurals and past tense, and constructs complete thoughts. This stage follows the telegraphic stage and represents a significant increase in linguistic complexity. The child moves beyond simple word combinations to master the specific rules of syntax and morphology required for effective communication.

66. (A) Learning Theory
The Learning Theory of language development is based on the principles of operant conditioning, as proposed by B.F. Skinner. This theory suggests that children learn language through reinforcement, where parents reward correct speech with attention or praise. By imitating adults and receiving feedback, children gradually shape their vocalizations into meaningful words and sentences, viewing language primarily as a learned behavioral habit.

67. (C) Intensity
Intensity in motivation refers to the strength or vigor of the effort expended by an individual. When a student receives a low grade and responds by studying much harder, they are increasing the intensity of their motivated behavior. This change demonstrates a more powerful and energetic application of their resources toward the goal of academic success, reflecting a high level of commitment.

68. (D) Hans Eysenck
Hans Eysenck originally proposed a two-factor model of personality consisting of introversion-extraversion and neuroticism-stability. He later added psychoticism as a third dimension to account for traits like aggression and lack of empathy. This three-factor model aimed to provide a biological basis for personality, suggesting that these traits are largely influenced by the functioning of the human nervous system.

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69. (C) Curiosity
Biological motives like hunger, thirst, and sex are essential for survival or species reproduction and are triggered by physiological needs. Curiosity, however, is considered a psychological or stimulus motive. It is driven by the need for mental stimulation and exploration of the environment rather than a specific tissue deficit. While innate, it serves a cognitive rather than a strictly survival function.

70. (B) Morality and ideals
The Superego is the component of personality that represents the internalized moral standards and values of society, learned from parents and others. It strives for perfection and is primarily concerned with morality and ideals. It acts as a moral filter, judging the Ego's actions and producing feelings of pride or guilt based on whether behavior meets these ethical standards.

71. (A) Cooing, Babbling, Holophrase, Telegraphic
Language development follows a predictable chronological sequence across cultures. It begins with cooing, which is followed by babbling. Next, children enter the holophrastic stage, using single words to represent complex ideas. This is followed by the telegraphic stage, where two-word phrases are used to communicate. This progression reflects the gradual development of the child's vocal apparatus and cognitive linguistic capabilities.

72. (A) Extrinsic factors in the job environment.
In Herzberg's Two-Factor Theory, hygiene factors are extrinsic elements found in the work environment. These include factors like company policy, salary, and working conditions. While their presence prevents job dissatisfaction, they do not lead to higher motivation or satisfaction. Motivation is instead driven by intrinsic factors,

CHAPTER 21
Contemporary Social Problems

1. Which of the following best defines drug addiction according to contemporary social perspectives?
(A) A temporary state of curiosity-driven substance experimentation.
(B) A chronic, relapsing disorder involving compulsive drug use.
(C) An occasional social habit that does not interfere with daily functioning.
(D) A controlled medicinal intake of prescribed psychotropic substances.

2. In which year was the Narcotic Drugs and Psychotropic Substances (NDPS) Act enacted in India?
(A) 1982
(B) 1985
(C) 1988
(D) 1992

3. Consider the following statements regarding categories of drugs:
1. Depressants increase the activity of the central nervous system.
2. Stimulants induce a state of alertness and increased energy.
3. Hallucinogens cause profound distortions in a person's perceptions of reality.

Which of the statements given above are correct?
(A) 1 and 2 only
(B) 2 and 3 only
(C) 1 and 3 only
(D) 2 only

4. Which of the following is a correct statement regarding the effects of stimulants?
(A) They significantly slow down heart rate and breathing.
(B) They are primarily used to induce deep sleep and relaxation.
(C) They cause a complete loss of physical sensation and pain.
(D) They increase heart rate, blood pressure, and alertness.

5. The following question consists of two statements—Assertion (A) and Reason (R). Answer the question by selecting the appropriate option.
Assertion (A): Peer pressure is a significant social factor contributing to juvenile drug experimentation.
Reason (R): Adolescents often feel a strong need for social acceptance and conformity within their age group.
(A) Both A and R are true and R is the correct explanation of A.
(B) Both A and R are true but R is not the correct explanation of A.
(C) A is true but R is false.
(D) A is false but R is true.

6. Match the drug categories in List I with their examples in List II and select the correct answer using the codes given below:
List I: Drug Category
P. Depressant
Q. Stimulant
R. Hallucinogen
S. Opioid
List II: Example
1. LSD
2. Cocaine
3. Alcohol
4. Morphine
(A) P-1, Q-4, R-3, S-2
(B) P-3, Q-2, R-1, S-4
(C) P-4, Q-3, R-2, S-1
(D) P-2, Q-1, R-4, S-3

7. Arrange the stages of Selye's General Adaptation Syndrome (GAS) in the correct chronological order:
1. Stage of Resistance
2. Alarm Reaction
3. Stage of Exhaustion

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82. (A) Needs for security and protection.
Safety needs in Maslow's hierarchy refer to the requirements for security, stability, and protection from physical and emotional harm. These needs become prominent once basic physiological requirements are satisfied. They include seeking a safe environment, financial security, and health. Establishing a sense of safety allows individuals to reduce anxiety and focus on higher-level needs like social belongingness and personal esteem.

83. (C) It usually begins around the age of 2.5 to 3 years.
Telegraphic speech is an early stage of language development characterized by short phrases that include only essential words. While it is more complex than the two-word stage, it typically begins much earlier than 2.5 to 3 years of age, usually starting between 18 and 24 months. By age three, most children are already transitioning into using more complete grammatical structures.

84. (D) Herzberg's Motivator Factors
Herzberg's Two-Factor Theory classifies factors such as the work itself, responsibility, and personal achievement as motivators. These intrinsic factors lead to high job satisfaction and encourage employees to perform better. When an employee is driven by the meaningfulness of their tasks and the autonomy they possess, they are being influenced by motivator factors rather than just the extrinsic hygiene factors.

85. (C) Affiliation — Being with others
Secondary motives are learned through social interaction and are not required for biological survival. Affiliation is a secondary motive that involves the desire to be with others and maintain positive social relationships. This contrasts with primary motives like the need for food, safety, or sleep, which are biological requirements essential for the physical maintenance of the organism and its survival.

86. (B) Openness — Agreeableness
The Big Five model consists of five distinct dimensions, each with a polar opposite. Extraversion is contrasted with introversion, conscientiousness with undirectedness, and neuroticism with emotional stability. However, openness and agreeableness are two separate dimensions rather than opposites of each other. Openness refers to curiosity, while agreeableness refers to being cooperative and compassionate in social interactions.

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87. (D) Dynamic and fluctuating.
Motivation is best described as dynamic and fluctuating because it changes over time based on internal needs and external circumstances. An individual's level of drive is not static; it rises when a need is unfulfilled and decreases once the goal is reached. This continuous process of activation and satisfaction ensures that humans remain responsive to their ever-changing environmental and physiological demands.

88. (A) Agreeableness
Eysenck's three-factor model includes extraversion, neuroticism, and psychoticism as the fundamental dimensions of personality. Agreeableness is not part of this specific model; instead, it is one of the five traits identified in the later Big Five model developed by McCrae and Costa. Eysenck's theory focused more on the biological and neurological foundations of the three traits he identified specifically.

89. (C) A tension state from biological needs.
In Clark Hull's theory, a drive is an internal state of tension or arousal caused by a biological need. This tension motivates the organism to engage in activities that will satisfy the need, thereby reducing the drive. For example, hunger creates a drive that leads to seeking food. Once satisfied, the tension is reduced, returning the organism to physiological equilibrium.

90. (B) Statement I is incorrect, but Statement II is correct.
Jung's theory of personality types distinguishes between introverts and extraverts based on the direction of their psychic energy. Extraverts are socially oriented and gain energy from being around other people and external activities. Introverts, however, find large social gatherings draining and prefer solitary environments. Therefore, the statement that introverts are comfortable in large gatherings is incorrect, as they usually find them overwhelming.

91. (D) Need for Affiliation
The need for affiliation is a psychological motive characterized by the desire to establish and

increase.
Reason (R): Advancements in medical technology and healthcare have improved life expectancy.
(A) Both A and R are true and R is the correct explanation of A.
(B) Both A and R are true but R is not the correct explanation of A.
(C) A is true but R is false.
(D) A is false but R is true.

16. Consider the following statements regarding the physical health effects of drug addiction:
1. Chronic use can lead to cardiovascular diseases.
2. Long-term abuse often causes irreversible liver damage.
3. Drug use strengthens the immune system against infections.

Which of the statements given above are correct?
(A) 1 and 2 only
(B) 2 and 3 only
(C) 1 and 3 only
(D) 2 only

17. Which of the following pairs is correctly matched?
(A) Stimulants — Alcohol
(B) Opioids — Heroin
(C) Depressants — Cocaine
(D) Hallucinogens — Morphine

18. Match the terms in List I with their descriptions in List II and select the correct answer using the codes given below:
List I: Term
P. Eustress
Q. Distress
R. Daily Hassles
S. Life Events
List II: Description
1. Major occurrences like marriage or job loss
2. Positive and motivating stress
3. Minor irritating everyday demands
4. Negative and damaging stress
(A) P-2, Q-4, R-3, S-1
(B) P-4, Q-2, R-1, S-3
(C) P-1, Q-3, R-2, S-4
(D) P-3, Q-1, R-4, S-2

19. Which of the following pairs is INCORRECTLY matched regarding the causes of juvenile delinquency?
(A) Family Factor — Broken homes
(B) Social Factor — Poverty and slums
(C) Peer Factor — High parental supervision
(D) School Factor — Lack of teacher-student rapport

20. The following question consists of two statements—Assertion (A) and Reason (R). Answer the question by selecting the appropriate option.
Assertion (A): Ageism can lead to the marginalization of the elderly in the professional workforce.
Reason (R): Ageism involves prejudice or discrimination on the grounds of a person's age.
(A) Both A and R are true and R is the correct explanation of A.
(B) Both A and R are true but R is not the correct explanation of A.
(C) A is true but R is false.
(D) A is false but R is true.

21. Read the following statements and select the correct option.
Statement I: Dementia is a specific disease, while Alzheimer's is a general term for cognitive decline.
Statement II: Cognitive decline in the aged often affects memory, thinking, and social abilities.
(A) Both Statement I and Statement II are correct.
(B) Both Statement I and Statement II are incorrect.
(C) Statement I is correct but Statement II is incorrect.
(D) Statement I is incorrect but Statement II is correct.

22. Consider the following statements regarding the Juvenile Justice (Care and Protection of Children) Act, 2015:
1. It replaced the Juvenile Justice Act of 2000.
2. It allows for juveniles aged 16-18 to be tried as adults for heinous crimes.
3. It focuses primarily on punitive measures rather than rehabilitation.

Which of the statements given above are correct?
(A) 1 and 2 only

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Which of the following represents the correct sequence?
(A) 1-2-3
(B) 2-1-3
(C) 3-2-1
(D) 2-3-1

8. Which of the following is a correct statement regarding the abuse of cannabis?
(A) It is classified strictly as a synthetic opioid in the NDPS Act.
(B) It is often derived from the hemp plant Cannabis sativa.
(C) It can lead to impaired short-term memory and coordination.
(D) Its use is associated with altered senses and changes in mood.

9. Consider the following statements regarding the social causes of drug addiction:
1. Breakdown of the traditional joint family system.
2. Lack of parental supervision and communication.
3. Exposure to drug-using role models has no impact on behavior.

Which of the statements given above are correct?
(A) 1 and 2 only
(B) 2 and 3 only
(C) 1 and 3 only
(D) 1 only

10. The following question consists of two statements—Assertion (A) and Reason (R). Answer the question by selecting the appropriate option.
Assertion (A): Substance abuse often leads to the disintegration of the family unit.
Reason (R): Drug addiction primarily affects the physical health of the user without impacting domestic finances.
(A) Both A and R are true and R is the correct explanation of A.
(B) Both A and R are true but R is not the correct explanation of A.
(C) A is true but R is false.
(D) A is false but R is true.

11. Which of the following treatment approaches focuses on replacing the addictive drug with a less harmful, medically supervised substitute?
(A) Cold Turkey and Complete Abstinence Method
(B) Aversion Therapy and Behavioral Conditioning
(C) Psychodynamic and Interpersonal Counseling
(D) Pharmacotherapy or Substitution Therapy

12. Match the social problems in List I with the specific conditions in List II and select the correct answer using the codes given below:
List I: Social Problem
P. Physical Problem of Aged
Q. Psychological Problem of Aged
R. Cognitive Decline
S. Economic Problem
List II: Specific Condition
1. Financial dependence
2. Loneliness
3. Sensory impairment
4. Alzheimer's Disease
(A) P-1, Q-2, R-3, S-4
(B) P-3, Q-2, R-4, S-1
(C) P-4, Q-3, R-2, S-1
(D) P-2, Q-4, R-1, S-3

13. Read the scenario described below and answer the question that follows:
An individual experiences a loss of interest in hobbies and social withdrawal due to the pharmacological impact of a specific substance. This most likely reflects:
(A) A positive social effect of drug use.
(B) A stimulant-induced peak in productivity.
(C) The mental health effects of drug addiction.
(D) Successful peer group integration.

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14. Which of the following is NOT a psychological factor contributing to drug addiction?
(A) Low self-esteem and insecurity.
(B) Desire to escape from emotional pain or trauma.
(C) Inability to cope with daily life stressors.
(D) High levels of academic achievement.

15. The following question consists of two statements—Assertion (A) and Reason (R). Answer the question by selecting the appropriate option.
Assertion (A): The elderly population in India is experiencing a significant demographic

Q. Alcohol
R. Cocaine
S. Cannabis
List II: Classification
1. Stimulant
2. Depressant
3. Commonly abused plant-based drug
4. Narcotic pain relievers
(A) P-1, Q-3, R-2, S-4
(B) P-2, Q-1, R-4, S-3
(C) P-3, Q-4, R-1, S-2
(D) P-4, Q-2, R-1, S-3

31. Which of the following is an INCORRECT statement regarding the demographic overview of the elderly in India?
(A) The proportion of the elderly in the total population is decreasing.
(B) Improved healthcare has led to a rise in the number of senior citizens.
(C) Feminization of ageing is observed, with more elderly women than men.
(D) Rural areas hold a significant portion of the elderly population.

32. Which of the following pairs is correctly matched?
(A) NSAP — Drug De-addiction
(B) JJ Act 2015 — Juvenile Justice
(C) Selye — Drug Classification
(D) NDPS Act — Old Age Pension

33. Arrange the following steps in a typical de-addiction and rehabilitation process in the correct order:
1. Detoxification
2. Social reintegration and aftercare
3. Psychological counseling and therapy
Which of the following represents the correct sequence?
(A) 1-2-3
(B) 1-3-2
(C) 3-1-2
(D) 2-1-3

34. Which of the following pairs is INCORRECTLY matched regarding stress coping strategies?
(A) Problem-focused — Ignoring the existence of stress
(B) Problem-focused — Changing the stressor
(C) Emotion-focused — Seeking social support
(D) Emotion-focused — Distancing oneself from the problem

35. Which of the following is NOT a common social problem faced by the elderly in modern urban India?
(A) Social isolation due to nuclear family trends.
(B) Neglect by adult children.
(C) Increased social status and authority within the family.
(D) Lack of community support systems.

36. Which of the following best describes the 'Nature of Stress'?
(A) An external physical force that always acts on the body.
(B) A purely psychological state with no physical symptoms.
(C) An abnormal condition affecting only mentally ill persons.
(D) A dynamic condition involving an opportunity or demand.

37. Read the scenario described below and answer the question that follows:
A person uses a substance that produces feelings of euphoria and significantly reduces the perception of physical pain. This substance is most likely:
(A) A stimulant
(B) A hallucinogen
(C) An opioid
(D) A vitamin supplement

38. Read the following statements and select the correct option.
Statement I: Economic dependence of the aged is often a result of lack of savings and retirement benefits.
Statement II: Financial independence in old age is guaranteed for all citizens in India by the Constitution.
(A) Both Statement I and Statement II are correct.
(B) Both Statement I and Statement II are incorrect.
(C) Statement I is correct but Statement II is incorrect.
(D) Statement I is incorrect but Statement II is correct.

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(A) Ignoring all deadlines and work responsibilities.
(B) Developing time management and coping skills.
(C) Consuming caffeine in excessive daily amounts.
(D) Avoiding social interaction with all colleagues.

81. Read the scenario described below and answer the question that follows:
A juvenile who has committed a crime is kept in a 'Special Home'. This is an example of:
(A) Punitive imprisonment in a state facility.
(B) Rehabilitation and reformatory measures.
(C) Isolation for the remainder of their life.
(D) Temporary school vacation for students.

82. Read the following statements and select the correct option.
Statement I: Social isolation among the elderly can lead to severe mental health issues like depression.
Statement II: Mental health in the aged is solely determined by their physical fitness.
(A) Both Statement I and Statement II are correct.
(B) Both Statement I and Statement II are incorrect.
(C) Statement I is correct but Statement II is incorrect.
(D) Statement I is incorrect but Statement II is correct.

83. When an individual uses drugs to fit into a high-status social circle, the cause of addiction is primarily:
(A) Biological
(B) Psychological
(C) Social
(D) Genetic

84. What is the definition of 'Hallucinogens'?
(A) Drugs used to increase physical body strength.
(B) Drugs used for treating the common head cold.
(C) Drugs that result in permanent weight reduction.
(D) Drugs causing people to see/hear non-entities.

85. Which of the following is correct regarding the National Social Assistance Programme?
(A) It is only for the youth.
(B) It is a private insurance scheme.
(C) It was launched in 1995.
(D) It provides free cars to senior citizens.

86. Which of the following is a correct statement about the effects of alcohol abuse?
(A) Improving reaction time while motor driving.
(B) Leading to problems like domestic violence.
(C) Acts as a stimulant that increases activity.
(D) Has no long-term effect on the human liver.

87. Which of the following is an INCORRECT statement about 'Coping'?
(A) It is the process of managing stressful demands.
(B) There are two main types: problem-focused and emotion-focused.
(C) Effective coping varies from person to person.
(D) Coping is always successful in eliminating stress completely.

88. Which of the following pairs is correctly matched?
(A) Cannabis — Bhang and Ganja
(B) Opioids — Cocaine
(C) Stimulant — Morphine
(D) Depressant — LSD

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89. Which of the following pairs is INCORRECTLY matched?
(A) Aged isolation — Social problem
(B) Financial dependence — Economic problem
(C) Loneliness — Physical problem
(D) Anxiety — Mental health problem

90. Which of the following is NOT a provision of the Maintenance and Welfare of Parents and Senior Citizens Act 2007?
(A) Mandatory overseas travel for parents.
(B) Establishment of maintenance tribunals.
(C) Setting a limit for maintenance allowance.
(D) Provision for protection of life/property.

91. What is the best way to describe the 'Resistance' stage in GAS?
(A) The body's initial shock and alarm reaction.

49. Read the following statements and select the correct option.
Statement I: Emotion-focused coping involves managing the emotional response to a stressful situation.
Statement II: Problem-focused coping involves taking direct steps to eliminate or reduce the stressor.
(A) Both Statement I and Statement II are correct.
(B) Both Statement I and Statement II are incorrect.
(C) Statement I is correct but Statement II is incorrect.
(D) Statement I is incorrect but Statement II is correct.

50. The concept of 'Ageism' refers to:
(A) Stereotyping individuals based on age.
(B) The biological process of getting older.
(C) The scientific study of elderly society.
(D) Policies favoring the youth over elderly.

51. Which of the following defines 'Stress' in the context of health psychology?
(A) Complete physical and mental well-being state.
(B) Disease caused strictly by viral infections.
(C) Emotional tension resulting from challenges.
(D) Ability to sleep long without interruptions.

52. In India, the demographic trend of the 'elderly population' indicates:
(A) A rapid decrease due to high birth rates.
(B) No change over the last five decades.
(C) A trend where the elderly prefer to live in urban slums only.
(D) A steady increase in both absolute numbers and proportion.

53. Which of the following is a correct statement regarding the causes of juvenile delinquency related to family?
(A) Stable, supportive families causing delinquency.
(B) Over-protection preventing any form of conduct.
(C) Inconsistent discipline causing delinquency.
(D) Family size having no correlation with behavior.

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54. Which of the following is an INCORRECT statement regarding stress and mental health?
(A) Chronic stress can lead to the development of anxiety disorders.
(B) Mental health is unaffected by long-term daily hassles.
(C) Stress is often a precursor to clinical depression.
(D) Coping mechanisms are essential for maintaining mental well-being under stress.

55. Which of the following pairs is correctly matched?
(A) Dementia — Normal memory at 90
(B) Senior Citizen Act — Drug de-addiction scheme
(C) Cannabis — Synthetic stimulant
(D) Loneliness — Psychological problem of aged

56. Which of the following pairs is INCORRECTLY matched?
(A) Economic effect — High savings rate
(B) Physical health effect — Liver cirrhosis
(C) Mental health effect — Psychosis
(D) Social effect — Marital discord

57. Which of the following is NOT a provision of the Juvenile Justice Act 2015?
(A) Establishment of the Juvenile Justice Boards.
(B) Provisions for adoption of orphaned children.
(C) Mandatory death penalty for heinous crimes.
(D) Formation of the Child Welfare Committees.

58. What is the best description of 'Distress'?
(A) Type of stress harmful to the body and mind.
(B) Stress leading to improved focus and performance.
(C) Stress that only occurs during early childhood.
(D) The final stage of recovery after a long illness.

59. If an individual is using deep breathing and meditation to handle work pressure, they are using:
(A) Problem-focused coping
(B) Avoidance-based coping

18. (A) P-2, Q-4, R-3, S-1
Stress is categorized into different types based on its nature and its effect on the individual.
Descriptions include:
P. Eustress is positive and motivating.
Q. Distress is negative and damaging.
R. Daily hassles are minor everyday irritations.
S. Life events are major occurrences like marriage.
Understanding these types is essential for managing overall health.

19. (C) Peer Factor — High parental supervision
Juvenile delinquency is often influenced by various environmental and social factors. While broken homes and poverty are known contributors, high parental supervision is actually a protective factor that helps prevent delinquent behavior. Monitoring a child's activities and providing consistent guidance reduces the likelihood of them engaging in illegal acts or being influenced by negative peer groups in the neighborhood.

20. (A) Both A and R are true and R is the correct explanation of A.
Ageism involves the systematic stereotyping and discrimination against individuals based on their age. This prejudice often leads to the marginalization of the elderly, particularly in the professional workforce where they may be unfairly viewed as less capable. Such discriminatory practices limit opportunities for senior citizens and contribute to social isolation, negatively impacting their overall economic stability and mental well-being.

21. (D) Statement I is incorrect but Statement II is correct.
Dementia serves as an umbrella term for various symptoms of cognitive decline, whereas Alzheimer's is a specific neurodegenerative disease that frequently causes these symptoms. Cognitive decline in the elderly typically affects memory, reasoning, and social abilities, which significantly impairs their daily functioning. Understanding these distinctions is crucial for providing appropriate medical care and psychological support to aging individuals.

22. (A) 1 and 2 only
The Juvenile Justice Act of 2015 introduced significant changes, including the provision to try juveniles aged sixteen to eighteen as adults for heinous crimes. While it replaced the previous legislation from 2000, it continues to emphasize the importance of rehabilitation and social reintegration. This balanced approach aims to address serious offenses while ensuring that young offenders receive the necessary support.

23. (D) Eustress
Eustress is a positive form of stress that can enhance motivation and improve performance. When an individual feels energized by a challenge, such as preparing for a difficult exam, they are experiencing eustress. Unlike distress, which causes anxiety and exhaustion, eustress provides the psychological drive needed to achieve goals and successfully manage demanding situations in academic or professional life.

24. (A) P-3, Q-1, R-4, S-2
Various legislative acts and government schemes in India target specific social groups and issues.
Target provisions include:
P. NSAP provides old age pensions.
Q. NDPS Act regulates drug trafficking.
R. JJ Act 2015 covers children in conflict with law.
S. Senior Citizen Act 2007 ensures maintenance of parents.
These frameworks provide essential social protection.

25. (C) A is true but R is false.
Selye's General Adaptation Syndrome outlines the body's physiological response to prolonged stress through three distinct stages. While the resistance stage involves the body attempting to adapt and maintain balance, it is the exhaustion stage where resources are fully depleted. In this final phase, the body's ability to resist the stressor collapses, often leading to serious health complications or illness.

26. (C) Persons aged 60 years and above
In the context of Indian social statistics and national policy, the elderly or aged population is standardly defined as individuals who have reached sixty years of age. This demographic classification is used by the government to

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(A) Body attempts to return to normal.
(B) Body gives up defense mechanisms.
(C) Body prepares for immediate action.
(D) Individual ignores the stressor.

70. Read the scenario described below and answer the question that follows:
An adolescent who starts stealing from home to buy expensive gadgets and fits the profile of a 'Child in Conflict with Law' is studied under:
(A) Gerontology
(B) Juvenile Delinquency
(C) Occupational Therapy
(D) Demographic Transition

71. Read the following statements and select the correct option.
Statement I: The Senior Citizen Act 2007 makes it legal for parents to claim maintenance from their children.
Statement II: The Act only applies to elderly people living in urban metropolitan cities.
(A) Both Statement I and Statement II are correct.
(B) Both Statement I and Statement II are incorrect.
(C) Statement I is correct but Statement II is incorrect.
(D) Statement I is incorrect but Statement II is correct.

72. Read the scenario described below and answer the question that follows:
A person experiences chronic headaches, back pain, and acidity due to high-pressure work deadlines. This is an example of:
(A) Psychosomatic disorders from stress.
(B) Purely genetic or hereditary condition.
(C) Communicable disease from environment.
(D) Cognitive decline or memory failure.

73. How is 'Drug Addiction' conceptually different from 'Drug Use'?
(A) Drug use is always illegal in law.
(B) Drug use only occurs in hospitals.
(C) Addiction involves loss of control.
(D) No conceptual difference exists.

74. Which of the following is true regarding Alzheimer's disease?
(A) Most common cause of dementia.
(B) Temporary condition lasting weeks.
(C) Caused by excessive daily exercise.
(D) Affects people only below thirty.

75. Which statement regarding the prevention of juvenile delinquency is correct?
(A) Punishment is the only effective way.
(B) Schools having no role in monitoring.
(C) Delinquency as inevitable behavior.
(D) Intervention in dysfunctional families.

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76. Which of the following is an INCORRECT statement regarding the treatment of drug addiction?
(A) Rehabilitation includes both physical and psychological recovery.
(B) Once treated, there is zero possibility of relapse in drug addiction.
(C) De-addiction programs in India are run by both government and NGOs.
(D) Counseling is a vital part of the recovery process.

77. Which of the following pairs is correctly matched?
(A) NDPS Act — 1950
(B) Eustress — Harmful stress
(C) NSAP — National Social Assistance Programme
(D) Stimulant — Alcohol

78. Which of the following pairs is INCORRECTLY matched?
(A) Elderly population — Persons aged 60 and above
(B) Dementia — Chronic disorder of mental processes
(C) Life events — Significant occurrences like marriage or job loss
(D) Eustress — Negative stress that causes high anxiety

79. Which of the following is NOT a characteristic of 'Depressants'?
(A) Increasing speed of reflexes.
(B) Reducing the rate of heartbeat.
(C) Inducing state of relaxation.
(D) Slowing central nervous system.

80. What is the most appropriate approach to managing stress in the workplace?

39. Read the scenario described below and answer the question that follows:
An elderly person experiences difficulty in performing routine daily tasks, forgets familiar names, and shows confusion about time and place. These are symptoms of:
(A) Normal biological aging and physical health decline.
(B) Eustress from engaging in challenging new activities.
(C) Social isolation resulting from changing family units.
(D) Cognitive decline such as Dementia or Alzheimer's.

40. What is the definition of 'Juvenile Delinquency'?
(A) Participation in illegal behavior by minors.
(B) Any act of rebellion by a teenager against parents.
(C) Poor academic performance by school-aged children.
(D) Engaging in high-risk sports by adolescents.

41. Which of the following is a primary cause of stress categorized as a "life event"?
(A) Getting stuck in heavy traffic during a commute.
(B) Coping with a noisy neighborhood environment.
(C) Experiencing the death of a spouse or close relative.
(D) Having a minor disagreement with a colleague.

42. Which statement regarding the psychological problems of the aged is correct?
(A) Loneliness worsened by death of spouse or peers.
(B) Depression as a rare occurrence among the elderly.
(C) Elderly people requiring no mental health support.
(D) Decline as a result of physical or mental laziness.

43. Which of the following is an INCORRECT statement about the NDPS Act 1985?
(A) It provides for the forfeiture of property derived from illicit drug trafficking.
(B) It makes provisions for the medical treatment of drug addicts.
(C) It prescribes stringent punishments for drug-related offenses.
(D) It prohibits the cultivation of any plant for medicinal purposes.

44. Which of the following pairs is correctly matched?
(A) Social factor of addiction — Genetic predisposition
(B) Psychosomatic disorder — Hypertension caused by stress
(C) Emotional coping — Identifying the root cause of a problem
(D) Ageism — Respecting the elderly

45. Which of the following pairs is INCORRECTLY matched?
(A) Depressant — Slows heart rate
(B) Stimulant — Increases alertness
(C) Hallucinogen — Prevents dreams
(D) Opioid — Relieves pain

46. Which of the following is NOT an effect of drug addiction on society?
(A) Increasing the crime rates.
(B) Losing economic productivity.
(C) Burdening the health system.
(D) Strengthening community bonds.

47. What is the most appropriate primary goal of juvenile rehabilitation?
(A) To reintegrate children into society as citizens.
(B) To punish children as severely as possible for law.
(C) To ensure children remain in confinement for life.
(D) To ignore behavior and provide no social services.

48. Read the scenario described below and answer the question that follows:
A teenager begins using drugs after seeing classmates do so, fearing they will be mocked if they refuse. This is a clear example of:
(A) Psychological trauma
(B) Peer pressure
(C) Economic necessity
(D) Cognitive decline

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(B) The point where the body's defenses fail.
(C) The immediate end of the stress response.
(D) Attempt to adapt and maintain homeostasis.

92. Read the scenario described below and answer the question that follows:
An elderly person is denied a bank loan simply because they are over 70, despite having collateral. This is an example of:
(A) Sound economic policy
(B) Ageism
(C) Cognitive decline
(D) Eustress

93. Read the following statements and select the correct option.
Statement I: Juvenile delinquency is often linked to the presence of delinquent subcultures in the neighborhood.
Statement II: Delinquency is found only in families with high income levels.
(A) Both Statement I and Statement II are correct.
(B) Both Statement I and Statement II are incorrect.
(C) Statement I is correct but Statement II is incorrect.
(D) Statement I is incorrect but Statement II is correct.

94. If a drug addict undergoes 'Detoxification', it primarily addresses:
(A) The social causes of their drug addiction.
(B) Their financial and economic problems.
(C) Their lack of educational qualifications.
(D) The physical dependence on the substance.

95. What is the definition of 'Demography' in the context of the aged?
(A) Statistical study of human populations.
(B) Movement of people from cities to villages.
(C) Study of ancient ruins and archaeological fossils.
(D) Study of how stress affects the human skin.

96. Which year is associated with the launch of the National Policy on Older Persons in India?
(A) 1950
(B) 1975
(C) 1999
(D) 2020

97. Which statement regarding the effects of opioids is correct?
(A) Primarily used to treat chronic insomnia.
(B) Leading to severe dependence and withdrawal.
(C) Classification as non-addictive substance.
(D) Increasing the user's appetite significantly.

98. Which of the following is an INCORRECT statement about the 'Child in Need of Care and Protection' under the JJ Act?
(A) It includes only children who have committed a crime.
(B) It includes children who are found begging.
(C) It includes children who are residing with an abusive guardian.
(D) It includes orphaned or abandoned children.

99. Which of the following pairs is correctly matched?
(A) Cocaine — Depressant
(B) Alcohol — Stimulant
(C) Heroin — Opioid
(D) Tobacco — Hallucinogen

100. Which of the following pairs is INCORRECTLY matched regarding health psychology?
(A) Stressor — An event that triggers stress
(B) Psychosomatic — Physical illness caused by mental factors
(C) GAS — General Adaptation Syndrome
(D) Eustress — Negative and damaging stress

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ANSWERS

1. (B) A chronic, relapsing disorder involving compulsive drug use.
Drug addiction is characterized as a long-term brain condition that manifests through seeking substances despite harmful consequences. It involves a shift from voluntary use to compulsive behavior, often triggered by changes in brain structure and function. Contemporary perspectives emphasize its chronic nature and the high risk of relapse, requiring comprehensive medical and social interventions for recovery.

2. (B) 1985
The Narcotic Drugs and Psychotropic Substances Act was established in 1985 to provide a comprehensive legal framework for controlling drug abuse in India. This legislation replaced older, less stringent laws to address the growing threat of illicit trafficking and addiction. It mandates strict penalties for unauthorized activities while also including provisions for the medical treatment of addicts.

3. (B) 2 and 3 only
Psychoactive drugs are categorized based on their specific physiological effects on the human body. Stimulants are known to accelerate the activity of the central nervous system, while hallucinogens produce profound alterations in a person's sensory perceptions. These classifications help in understanding how different substances influence mental clarity, physical alertness, and the general awareness of one's surroundings.

4. (D) They increase heart rate, blood pressure, and alertness.
Stimulants are a category of drugs that significantly increase the activity of the central nervous system and the brain. Users typically experience a surge in heart rate, blood pressure, and psychological alertness. These substances are often abused to enhance energy levels or focus, but they can lead to severe cardiovascular issues and other health complications over time.

5. (A) Both A and R are true and R is the correct explanation of A.
Adolescents often face significant social pressure to conform to the behaviors of their peer groups to gain acceptance. This desire for belonging makes them highly vulnerable to experimenting with drugs when their friends do so. Consequently, peer influence serves as a primary driver for juvenile substance use, as young individuals prioritize social status over long-term health risks.

6. (B) P-3, Q-2, R-1, S-4
Substances are classified according to their pharmacological properties and physiological impact on the central nervous system.
Common examples of drug categories include:
   P. Depressants like alcohol slow bodily functions.
   Q. Stimulants like cocaine increase alertness.
   R. Hallucinogens such as LSD distort perceptions.
   S. Opioids like morphine are used for pain management.

7. (B) 2-1-3
Selye's General Adaptation Syndrome describes the body's physical response to stress through three chronological stages. It begins with the alarm reaction, where the body prepares for immediate action. This is followed by the resistance stage, where the body attempts to adapt. Finally, if stress continues, the exhaustion stage occurs, where the body's internal resources are completely depleted.

8. (A) It is classified strictly as a synthetic opioid in the NDPS Act.
The Narcotic Drugs and Psychotropic Substances Act of 1985 provides a detailed legal framework for classifying various drugs and their derivatives. This legislation categorizes substances like cannabis and opioids under specific schedules to regulate their production and use. These classifications are essential for legal proceedings and determining penalties for the illicit trafficking of controlled substances across the country.

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9. (A) 1 and 2 only
The breakdown of traditional family structures and the lack of consistent parental supervision are major social factors contributing to drug addiction. When the support system of a joint family is lost, individuals may feel isolated or lack the guidance necessary to resist substance abuse. Effective communication within the family unit is crucial for preventing the onset of addictive behaviors.

10. (C) A is true but R is false.
Drug addiction significantly impacts the stability of the family unit, often leading to domestic conflict and the breakdown of relationships. While the user's physical health suffers, the economic consequences are equally severe due to the high cost of maintaining a drug habit. Financial resources are often diverted from basic needs, causing long-term instability and hardship for all members.

11. (D) Pharmacotherapy or Substitution Therapy
Pharmacotherapy, also known as substitution therapy, involves using medically approved substances to treat drug addiction. This approach replaces the harmful addictive drug with a controlled, less potent substitute under professional supervision. The goal is to stabilize the patient, reduce withdrawal symptoms, and minimize the cravings, thereby facilitating a safer and more manageable transition toward long-term recovery and health.

12. (B) P-3, Q-2, R-4, S-1
The elderly face various challenges that are classified into physical, psychological, cognitive, and economic categories.
Specific conditions include:
P. Sensory impairment is a physical problem.
Q. Loneliness is a psychological issue.
R. Alzheimer's represents cognitive decline.
S. Financial dependence is an economic problem.
These factors collectively impact the quality of life for senior citizens.

13. (C) The mental health effects of drug addiction.
Drug addiction has profound pharmacological impacts on the brain, often leading to significant changes in mood and behavior. Individuals may experience a loss of interest in activities they once enjoyed and withdraw from social interactions. These symptoms reflect the mental health burden of substance abuse, as the brain's reward system becomes increasingly dependent on the drug for stimulation.

14. (D) High levels of academic achievement.
Psychological factors such as low self-esteem, emotional trauma, and the inability to manage stress often drive individuals toward drug use as a coping mechanism. Conversely, high academic achievement is generally considered a protective factor rather than a cause for addiction. Success in education typically reflects strong cognitive skills and goal-oriented behavior, which help individuals maintain a healthy lifestyle.

15. (A) Both A and R are true and R is the correct explanation of A.
India is experiencing a notable demographic shift characterized by a growing elderly population. This increase is primarily driven by significant advancements in medical technology and healthcare services, which have greatly improved life expectancy. As more people live longer due to better nutrition and disease control, the social and economic focus must adapt to meet the needs of senior citizens.

16. (A) 1 and 2 only
Chronic substance abuse leads to a wide range of debilitating physical health problems. Long-term drug use can cause permanent damage to vital organs, including the heart and the liver, increasing the risk of cardiovascular diseases and cirrhosis. Far from strengthening the body, addiction significantly weakens the immune system, making the individual much more susceptible to various infections and illnesses.

17. (B) Opioids — Heroin
Drugs are categorized based on their chemical properties and their specific effects on the human body. Heroin is a highly addictive substance that belongs to the opioid class, which is primarily known for its powerful pain-relieving properties. This classification is vital for both medical treatment and legal regulation, as opioids carry a very high risk of dependence and overdose.

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(C) Externalizing coping
(D) Emotion-focused coping

60. Read the following statements and select the correct option.
Statement I: The NDPS Act was amended to include stricter punishments for drug trafficking.
Statement II: The Act completely ignores the rehabilitation of drug addicts.
(A) Both Statement I and Statement II are correct.
(B) Both Statement I and Statement II are incorrect.
(C) Statement I is correct but Statement II is incorrect.
(D) Statement I is incorrect but Statement II is correct.

61. Which of the following illustrates the concept of 'Daily Hassles' as a cause of stress?
(A) Losing a house in a severe natural disaster.
(B) Graduating from a highly prestigious university.
(C) Getting stuck in heavy traffic going to work.
(D) Winning a large sum of money in a state lottery.

62. What is the definition of 'Stimulants'?
(A) Substances that slow down the activity of the brain.
(B) Substances that induce sleep and reduce any anxiety.
(C) Substances that have no effect on the human system.
(D) Substances that excite the central nervous system.

63. Which of the following is a correct statement regarding the Juvenile Justice Board?
(A) A Metropolitan Magistrate and two social workers.
(B) A District Magistrate and local law enforcement.
(C) A branch of the local municipal police department.
(D) A council for handling children above age twenty.

64. Which of the following is a correct statement regarding 'Eustress'?
(A) Stress associated with constant hopelessness.
(B) Stress that enhances motivation to achieve goals.
(C) Stress leading to physical illness in the long run.
(D) Stress caused by extremely traumatic life events.

65. Which of the following is an INCORRECT statement regarding the social factors of drug addiction?
(A) Cultural acceptance of certain substances can influence usage.
(B) Peer pressure is irrelevant once an individual reaches adulthood.
(C) Social isolation can drive individuals toward substance abuse.
(D) Modernization and changing values impact drug consumption patterns.

66. Which of the following pairs is correctly matched regarding stress reactions?
(A) Exhaustion stage — Depletion of bodily resources
(B) Alarm stage — The second stage of the GAS reaction
(C) Resistance stage — The initial fight-or-flight response
(D) Hans Selye — The creator of the Juvenile Justice system

67. Which of the following is INCORRECTLY matched regarding the effects of stress?
(A) Psychological effect — Low frustration tolerance
(B) Behavioral effect — Increased substance use
(C) Physiological effect — Improved digestive system
(D) Emotional effect — Irritability and mood swings

68. Which of the following is NOT an economic problem commonly faced by the elderly in India?
(A) Loss of regular monthly income.
(B) High expenditure on healthcare.
(C) Lack of adequate pension funds.
(D) Abundance of high-paying jobs.

69. What is the most appropriate way to describe the 'Alarm Reaction' stage of stress?

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determine eligibility for various social welfare schemes, pensions, and healthcare benefits. Understanding this threshold is vital for analyzing population trends and planning resources.

27. (D) Providing financial assistance through old age pensions.
The National Social Assistance Programme is a significant social welfare initiative in India that aims to provide a safety net for vulnerable citizens. For the elderly, its primary focus is the provision of financial assistance through monthly old age pensions. This support is crucial for ensuring a basic level of economic security for senior citizens who lack other income sources.

28. (A) 1 and 2 only
Juvenile delinquency refers to illegal or criminal behavior committed by minors. It is a complex social issue influenced by various environmental factors, including the neighborhood and community setting. While genetic predispositions may exist, social influences like family dynamics and peer pressure play a far more significant role in the development of delinquent behavior than biological factors alone, according to research.

29. (C) Continued stress leads to organ system breakdown.
The exhaustion stage is the final phase of Selye's General Adaptation Syndrome. It occurs when the body has been subjected to chronic stress for an extended period, leading to the total depletion of its physiological resources. At this point, the immune system weakens, and the risk of organ system failure or serious chronic illnesses increases significantly due to prolonged strain.

30. (D) P-4, Q-2, R-1, S-3
Different substances are categorized based on their chemical properties and their impact on the human body.
Classifications include:
P. Opioids act as narcotic pain relievers.
Q. Alcohol is a central nervous system depressant.
R. Cocaine is a powerful stimulant.
S. Cannabis is a commonly abused plant-based drug.
These classifications help in understanding drug effects.

31. (A) The proportion of the elderly in the total population is decreasing.
Demographic trends in India show a steady increase in both the absolute number and the overall proportion of the elderly population. This shift is driven by improved healthcare and rising life expectancy. Additionally, the feminization of aging is observed, with more elderly women surviving into late adulthood. Rural areas continue to house a significant portion of this growing senior demographic.

32. (B) JJ Act 2015 — Juvenile Justice
The Juvenile Justice (Care and Protection of Children) Act of 2015 provides the legal framework for handling children in conflict with the law and those in need of care. It emphasizes the principle of restorative justice and rehabilitation rather than purely punitive measures. This legislation ensures that minors are treated with sensitivity and integrated back into society as responsible citizens.

33. (B) 1-3-2
The de-addiction and rehabilitation process typically follows a logical progression to ensure long-term recovery. It begins with detoxification to remove the substance from the body. This is followed by intensive psychological counseling and therapy to address the root causes of addiction. Finally, social reintegration and aftercare programs are implemented to help the individual return to society and prevent potential relapses.

34. (A) Problem-focused — Ignoring the existence of stress
Problem-focused coping involves taking direct and proactive steps to change the stressor or the situation causing the stress. Ignoring the existence of a problem is considered an avoidant or emotion-focused strategy rather than a problem-focused one. Effective problem-focused coping requires identifying the source of tension and developing practical solutions to eliminate or reduce the impact of the stressor significantly.

35. (C) Increased social status and authority within the family.
In modern urban India, the transition toward nuclear family structures has led to several social problems for the elderly, including isolation and

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88. (A) Cannabis — Bhang and Ganja
Cannabis is a plant-based substance that is commonly consumed in various forms, such as bhang and ganja. These derivatives are subject to regulation under the Narcotic Drugs and Psychotropic Substances Act due to their psychoactive properties. Understanding these different forms is important for legal and medical reasons, as the use of cannabis can have significant effects on an individual's mental and physical health.

89. (C) Loneliness — Physical problem
Loneliness is primarily a psychological and social problem rather than a physical one. It involves the emotional distress caused by a lack of social connection or meaningful relationships. While it can lead to physical symptoms like sleep disturbances, its core nature is mental. Distinguishing between physical ailments and psychological issues is essential for providing the correct support and intervention for the elderly population.

90. (A) Mandatory overseas travel for parents.
The Maintenance and Welfare of Parents and Senior Citizens Act of 2007 focuses on ensuring the basic survival and dignity of the elderly. It includes provisions for maintenance tribunals, financial limits on allowances, and the protection of their life and property. Mandatory overseas travel is not a provision of the Act, which instead prioritizes fundamental rights like food, clothing, shelter, and medical care.

91. (D) Attempt to adapt and maintain homeostasis.
The resistance stage is the second phase of Selye's General Adaptation Syndrome, occurring after the initial alarm reaction. During this stage, the body attempts to adapt to the persistent stressor and return to a state of balance, or homeostasis. While the body remains on high alert, it tries to manage its resources more efficiently to cope with the ongoing demand and minimize damage.

92. (B) Ageism
Denying a loan to an individual solely because of their age is a clear example of ageism. This form of discrimination involves making unfair judgments or decisions based on age rather than on the person's actual capabilities or financial standing. Such practices marginalize the elderly and limit their economic independence, demonstrating the negative impact of age-based stereotypes in modern social and financial institutions.

93. (C) Statement I is correct but Statement II is incorrect.
Juvenile delinquency is often influenced by the presence of delinquent subcultures in a neighborhood, where illegal acts are normalized. However, delinquency is not found only in high-income families; it occurs across all economic backgrounds. Factors such as family stability, peer influence, and community environment are much more accurate predictors of delinquent behavior than the household income level alone in most cases.

94. (D) The physical dependence on the substance.
Detoxification is the medical process of removing toxic substances from the body and managing the subsequent withdrawal symptoms. It primarily addresses the physical dependence that an individual has developed on a drug. While detox is a crucial first step in the de-addiction process, it must be followed by psychological counseling and social support to address the long-term behavioral aspects of addiction.

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95. (A) Statistical study of human populations.
Demography is the scientific and statistical study of human populations, including their size, structure, and distribution. In the context of the aged, demographic research focuses on trends such as the increasing proportion of senior citizens and changes in life expectancy. This data is essential for governments to plan for future healthcare needs, social security requirements, and overall social policy for an aging society.

96. (C) 1999
The National Policy on Older Persons was announced by the Government of India in 1999. This policy was a landmark step in recognizing the rights of the elderly and established a framework for their welfare, including healthcare, financial security, and shelter. It aimed to encourage families to care for their older members while also providing institutional support for those in need across the nation.

44. (B) Psychosomatic disorder — Hypertension caused by stress
Psychosomatic disorders are physical illnesses that are caused or aggravated by mental factors, such as chronic stress. Hypertension is a classic example, as prolonged emotional tension can lead to consistently high blood pressure. These conditions demonstrate the strong connection between psychological well-being and physical health, highlighting the importance of managing stress to prevent the onset of serious medical issues.

45. (C) Hallucinogen — Prevents dreams
Hallucinogens are psychoactive substances that primarily cause profound distortions in a person's perceptions of reality, including seeing or hearing things that do not exist. They do not have the specific pharmacological function of preventing dreams; in fact, they often induce dream-like states while the user is awake. Understanding the actual sensory effects of these drugs is crucial for identifying their abuse.

46. (D) Strengthening community bonds.
Drug addiction has numerous negative effects on society, including rising crime rates, decreased economic productivity, and an increased burden on the healthcare system. Rather than strengthening community bonds, substance abuse tends to disintegrate social structures and create distrust among neighbors. It often leads to the breakdown of families and the erosion of social cohesion, creating long-term problems for the community.

47. (A) To reintegrate children into society as citizens.
The primary goal of juvenile rehabilitation is to reform young offenders and successfully reintegrate them into society as responsible citizens. This approach focuses on addressing the root causes of delinquent behavior through education, counseling, and vocational training. By prioritizing reform over punishment, the juvenile justice system aims to prevent future criminal activity and provide children with a second chance.

48. (B) Peer pressure
Peer pressure is a powerful social force, especially among adolescents who feel a strong need to fit in with their social group. When a teenager starts using drugs to avoid being mocked or excluded by classmates, they are reacting to this external influence. Peer pressure often overrides individual judgment, leading young people to engage in risky behaviors they otherwise might avoid.

49. (A) Both Statement I and Statement II are correct.
Coping strategies are generally divided into two main categories: emotion-focused and problem-focused. Emotion-focused coping involves managing the internal emotional distress caused by a stressor, while problem-focused coping targets the external source of the stress to eliminate or change it. Both methods are essential for maintaining psychological health, and individuals often use a combination of both to handle different stressful situations.

50. (A) Stereotyping individuals based on age.
Ageism is the term used to describe the systematic stereotyping and discrimination against individuals or groups based on their age. While it can affect any age group, it is most commonly directed toward the elderly. This prejudice often manifests in the workplace, healthcare, and social interactions, leading to the marginalization of senior citizens and the denial of their basic rights and opportunities.

51. (C) Emotional tension resulting from challenges.
In health psychology, stress is defined as the emotional and physical tension that arises when an individual perceives a challenge or threat. It is the body's natural response to demanding situations that require adaptation or action. While some stress can be motivating, chronic tension can lead to significant health problems, affecting both mental clarity and overall physical well-being.

52. (D) A steady increase in both absolute numbers and proportion.
India is undergoing a significant demographic transition characterized by a steady increase in the absolute number and the proportion of the elderly population. This trend is a result of improved medical facilities and higher living standards, which have increased life expectancy. As the senior population grows, there is an increasing need for specialized healthcare

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CHAPTER 22
Values and Attitudes

1. Which of the following best defines the concept of 'Values' in psychological terms?
(A) Transient feelings about a specific social event and temporary reactions.
(B) Enduring beliefs about preferable modes of conduct.
(C) Physiological responses to external environmental stimuli and reflexes.
(D) Short-term cognitive biases based on immediate gratification and rewards.

2. In the study of human values, what does the 'evaluative dimension' primarily refer to?
(A) Assigning goodness or badness to an object or behavior.
(B) The speed and frequency at which a value is initially learned by a person.
(C) The underlying biological origin and genetic basis of complex value systems.
(D) The specific mathematical probability of a value being expressed in society.

3. Which characteristic of values implies that they do not change easily over time?
(A) Malleability
(B) Situational fluidity
(C) Stability and endurance
(D) Temporary disposition

4. Which of the following is the correct statement regarding the hierarchical manner in which values are organized?
(A) Maintaining that all values hold exactly equal importance at all times.
(B) Assuming values are only important within formal political hierarchies.
(C) Claiming that values are unique and cannot be compared with one another.
(D) Ranking values based on their relative importance.

5. Which of the following is an INCORRECT statement regarding the nature of values?
(A) Values serve as universal standards for guiding individual and social conduct.
(B) Values possess a strong motivational component that drives goal-oriented actions.
(C) Values are biological traits inherited through human DNA.
(D) Values remain relatively stable throughout the duration of a person's lifetime.

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6. Which of the following represents an INCORRECT pair regarding the sources of values?
(A) Family — Primary socialization
(B) Media — Peer-to-peer biological inheritance
(C) Education — Formal transmission of knowledge
(D) Religion — Moral and ethical frameworks

7. What is the primary function of the 'hierarchical organization' of values?
(A) Ensuring that all values are discarded simultaneously during changes.
(B) Preventing any single value from becoming stable or enduring in time.
(C) Eliminating the evaluative dimension of values to make them neutral.
(D) Helping individuals resolve conflicts between competing values.

8. Which feature of values refers to the fact that certain values like 'honesty' are recognized globally, while their expression may vary?
(A) Cultural universality and variation
(B) Absolute cultural isolation
(C) Genetic determination
(D) Temporal instability

9. According to the motivational function of values, values act as:
(A) Inhibitors of all social action.
(B) Passive reflections of past biological history.
(C) Triggers that lead to specific goal-directed behavior.
(D) Random occurrences in the human psyche.

62. (D) Substances that excite the central nervous system.
Stimulants are psychoactive substances that increase the activity of the central nervous system. They work by speeding up the messages between the brain and the body, leading to increased alertness, energy, and physical activity. While they may be used for certain medical conditions, their abuse can lead to severe health issues, including heart palpitations, high blood pressure, and psychological dependence.

63. (A) A Metropolitan Magistrate and two social workers.
The Juvenile Justice Board is a specialized body established to handle cases involving children in conflict with the law. It typically consists of a Metropolitan Magistrate or Judicial Magistrate and two social workers, at least one of whom must be a woman. This composition ensures that the legal proceedings are balanced with a social and developmental perspective focused on the child's rehabilitation.

64. (B) Stress that enhances motivation to achieve goals.
Eustress is a positive type of stress that is associated with challenging but manageable situations. It provides the motivation and energy needed to achieve goals, such as starting a new job or competing in a sport. Eustress is beneficial for personal growth and performance, as it encourages individuals to push their limits and develop new skills in a productive way.

65. (B) Peer pressure is irrelevant once an individual reaches adulthood.
While peer pressure is most commonly associated with adolescence, it remains a significant factor in social behavior throughout adulthood. Adults also feel the need for social acceptance and may be influenced by the drug-using habits of their social circle or professional colleagues. Social factors, including isolation and cultural values, continue to play a critical role in the development and maintenance of addiction.

66. (A) Exhaustion stage — Depletion of bodily resources
In Selye's General Adaptation Syndrome, the exhaustion stage represents the point where the body's ability to cope with chronic stress is finally compromised. After prolonged resistance, the internal resources needed to maintain homeostasis are completely depleted. This state leads to a significant increase in vulnerability to physical and mental illnesses, as the body can no longer defend itself against the persistent stressor.

67. (C) Physiological effect — Improved digestive system
Stress typically has negative physiological effects on the body, including the disruption of the digestive system. High levels of stress hormones can lead to issues like acidity, stomach pain, and irregular digestion rather than improving them. Understanding these physiological reactions is essential for identifying how chronic stress contributes to the development of various physical health problems and long-term medical conditions.

68. (D) Abundance of high-paying jobs.
The elderly in India face several economic challenges, including the loss of regular income and the high cost of healthcare for age-related ailments. An abundance of high-paying jobs is certainly not a common problem; in fact, many senior citizens struggle to find any suitable employment due to age-related discrimination or physical limitations. This economic vulnerability makes government pensions and family support essential for their survival.

69. (C) Body prepares for immediate action.
The alarm reaction is the initial stage of Selye's General Adaptation Syndrome. It is the body's immediate response to a perceived threat or stressor, triggering the 'fight-or-flight' mechanism. During this phase, heart rate and adrenaline levels increase, preparing the individual for immediate action to either confront or avoid the danger. This physiological arousal is the body's way of mobilizing its resources.

70. (B) Juvenile Delinquency
Juvenile delinquency refers to the illegal acts committed by minors, such as stealing or other criminal behaviors. In this scenario, the adolescent fits the profile of a 'Child in Conflict with Law,' which is a central concept in the study of juvenile justice. Research in this field focuses on understanding the environmental, social, and

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psychological factors that lead young people to break the law.

71. (C) Statement I is correct but Statement II is incorrect.
The Maintenance and Welfare of Parents and Senior Citizens Act of 2007 provides a legal framework for parents to claim maintenance from their children if they cannot support themselves. This law is not limited to urban areas; it applies to all citizens across India. The Act aims to ensure that the elderly are provided with basic necessities and are protected from neglect by their families.

72. (A) Psychosomatic disorders from stress.
Chronic headaches, back pain, and acidity are often physical manifestations of psychological stress, known as psychosomatic disorders. These conditions occur because the mind and body are deeply interconnected, and prolonged emotional tension can lead to actual physical damage or chronic pain. Identifying the link between work pressure and these symptoms is crucial for developing effective stress management strategies to improve health.

73. (C) Addiction involves loss of control.
While 'drug use' may refer to the occasional or medicinal consumption of a substance, 'drug addiction' is characterized by a compulsive need and a total loss of control over the substance. Addiction involves a psychological and physical dependence that persists despite the user's awareness of the harmful consequences. This distinction is critical for medical diagnosis, legal classification, and the development of effective treatment.

74. (A) Most common cause of dementia.
Alzheimer's disease is a progressive neurodegenerative disorder and is recognized as the most common cause of dementia in the elderly. it leads to the gradual decline of memory, thinking skills, and the ability to carry out simple daily tasks. Unlike temporary confusion, Alzheimer's is a permanent condition that requires long-term care and support for both the patient and their family members.

75. (D) Intervention in dysfunctional families.
Preventing juvenile delinquency requires a proactive approach that addresses the underlying social causes, such as family dysfunction. Intervening in unstable or abusive home environments can provide children with the support they need to avoid criminal behavior. By offering counseling and resources to at-risk families, society can reduce the likelihood of minors being influenced by negative environments and help them develop healthy behaviors.

76. (B) Once treated, there is zero possibility of relapse in drug addiction.
Drug addiction is recognized as a chronic, relapsing disorder, meaning that there is always a possibility of returning to drug use even after successful treatment. Recovery is a long-term process that requires ongoing support, counseling, and lifestyle changes to maintain sobriety. Effective rehabilitation programs emphasize the importance of aftercare and relapse prevention strategies to help individuals stay committed to their recovery journey.

77. (C) NSAP — National Social Assistance Programme
The National Social Assistance Programme is a significant social welfare initiative in India that aims to provide a safety net for vulnerable citizens, including the elderly. It includes various components such as old age pensions and disability support. This programme is essential for ensuring that senior citizens who lack other resources have access to a basic level of financial security and dignity.

78. (D) Eustress — Negative stress that causes high anxiety
Eustress is actually a positive form of stress that motivates individuals and improves their performance. Negative stress that causes high anxiety and harm is known as distress. Understanding the difference between these two types of stress is essential in health psychology, as it helps individuals identify when stress is helping them grow versus when it is damaging their overall physical and mental health.

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79. (A) Increasing speed of reflexes.
Depressants are substances that slow down the activity of the central nervous system, leading to a state of relaxation and a reduced heart rate. They typically impair coordination and slow down reflexes rather than increasing them. Common examples include alcohol and certain sedative medications. Because they decrease alertness and physical response time, they can be dangerous when using machinery or driving a vehicle.

80. (B) Developing time management and coping skills.
Managing workplace stress effectively involves developing practical skills like time management and healthy coping mechanisms. By organizing tasks and prioritizing responsibilities, individuals can reduce the feeling of being overwhelmed by deadlines. These proactive strategies help maintain mental clarity and prevent the onset of chronic stress, leading to better professional performance and improved long-term health and well-being in the work environment.

81. (B) Rehabilitation and reformatory measures.
A 'Special Home' under the juvenile justice system is a facility designed for the rehabilitation and reform of children who have committed crimes. Unlike regular prisons, these homes focus on providing education, vocational training, and psychological counseling to help minors change their behavior. The goal is to prepare them for a successful return to society as law-abiding and productive citizens.

82. (C) Statement I is correct but Statement II is incorrect.
Social isolation is a major factor that can lead to severe mental health issues like depression among the elderly. However, mental health is not determined solely by physical fitness; it is also influenced by social engagement, emotional support, and cognitive stimulation. A holistic approach that addresses both physical and social needs is essential for maintaining the overall well-being of the aging population.

83. (C) Social
When an individual uses drugs primarily to fit into a specific social circle or gain status, the cause of addiction is social in nature. This highlights the powerful influence of peer groups and the desire for social acceptance in driving behavior. Social causes of addiction often involve the individual's environment, relationships, and the cultural attitudes toward substance use within their community.

84. (D) Drugs causing people to see/hear non-entities.
Hallucinogens are a category of psychoactive drugs that significantly alter a person's sensory perceptions. They can cause individuals to see, hear, or feel things that are not actually present, often leading to profound distortions in their sense of reality and time. These effects can be unpredictable and may lead to intense emotional experiences or psychological distress, making them dangerous for the user's mental health.

85. (C) It was launched in 1995.
The National Social Assistance Programme was launched by the Government of India in 1995 to provide social security to its citizens. It represents a significant step toward fulfilling the Directive Principles of State Policy by providing financial assistance to the elderly, widows, and persons with disabilities. This programme is a vital component of the country's efforts to reduce poverty and support vulnerable populations.

86. (B) Leading to problems like domestic violence.
Alcohol abuse has devastating social consequences, including a high correlation with domestic violence and family instability. It impairs judgment and reduces impulse control, which can lead to aggressive behavior and conflict within the household. Beyond its physical health risks, alcohol addiction often results in the breakdown of relationships and places a significant emotional and economic burden on the entire family unit.

87. (D) Coping is always successful in eliminating stress completely.
Coping is the ongoing process of managing the internal and external demands that are perceived as stressful. While effective coping strategies can significantly reduce stress and improve well-being, they are not always successful in eliminating stress completely. The success of a coping method varies depending on the individual, the nature of the stressor, and the resources available to handle the specific challenge.

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neglect. Unlike traditional societies where they held significant authority, many senior citizens now experience a loss of status and decision-making power within the family. This lack of community support systems often contributes to feelings of loneliness and worthlessness.

36. (D) A dynamic condition involving an opportunity or demand.
Stress is best described as a dynamic condition in which an individual is confronted with an opportunity, demand, or resource related to what they desire. It involves the person's perception of the situation and their ability to cope with it. Stress can be either positive or negative, depending on the individual's reaction and the specific nature of the external challenge.

37. (C) An opioid
Opioids are a class of drugs that interact with the nervous system to produce feelings of euphoria and significantly reduce the perception of physical pain. Because of these powerful effects, they are frequently used in medical settings for pain management but also carry a high risk of addiction. Prolonged use leads to physical dependence and severe withdrawal symptoms if the drug is stopped.

38. (C) Statement I is correct but Statement II is incorrect.
Economic dependence among the elderly in India is often a direct result of inadequate savings and a lack of retirement benefits. While the government provides some social assistance through pensions, financial independence is not guaranteed for all citizens by the Constitution. Many senior citizens remain vulnerable to poverty and must rely on their children or community support for basic survival.

39. (D) Cognitive decline such as Dementia or Alzheimer's.
Difficulty in performing routine tasks, frequent forgetfulness, and confusion regarding time or location are hallmark symptoms of cognitive decline. These issues are often associated with conditions like dementia or Alzheimer's disease, which involve the progressive loss of cognitive functions. Such conditions go beyond normal biological aging and require specialized medical diagnosis and care to manage the symptoms effectively over time.

40. (A) Participation in illegal behavior by minors.
Juvenile delinquency is defined as the participation in illegal or criminal behavior by individuals who have not yet reached the legal age of adulthood. This term covers a wide range of offenses, from minor infractions to serious crimes. Understanding delinquency requires looking at various social, economic, and psychological factors that influence a young person's choice to engage in unlawful activities.

41. (C) Experiencing the death of a spouse or close relative.
In stress research, "life events" refer to significant occurrences that require major adjustments in an individual's life. The death of a spouse or a close relative is considered one of the most stressful life events due to the profound emotional and social changes it brings. Unlike daily hassles, these events have a long-term impact on a person's mental and physical health.

42. (A) Loneliness worsened by death of spouse or peers.
Loneliness is a significant psychological problem for the elderly, often exacerbated by the loss of a spouse, friends, or peers. This emotional isolation can lead to deeper mental health issues, such as depression and anxiety. Social support networks and community engagement are essential for maintaining the psychological well-being of senior citizens as they navigate the challenges of aging and bereavement.

43. (D) It prohibits the cultivation of any plant for medicinal purposes.
The Narcotic Drugs and Psychotropic Substances Act of 1985 regulates the cultivation of plants used for narcotics while allowing for medicinal and scientific purposes. It does not impose a total ban but rather establishes a strict licensing system. This ensures that essential medications remain available while preventing the illegal production and distribution of dangerous psychoactive substances across the country.

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97. (B) Leading to severe dependence and withdrawal.
Opioids are highly addictive drugs that can lead to severe physical and psychological dependence within a short period of use. When a regular user stops taking the drug, they often experience intense withdrawal symptoms, which can be both painful and dangerous. Because of this high risk of addiction, the use and distribution of opioids are strictly regulated under national and international drug control laws.

98. (A) It includes only children who have committed a crime.
Under the Juvenile Justice Act, a 'Child in Need of Care and Protection' includes a much broader group than just those who have committed crimes. It encompasses orphaned, abandoned, or begging children, as well as those living in abusive or neglectful environments. The Act ensures that these vulnerable children receive the necessary social services, shelter, and legal protection to ensure their well-being and safety.

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99. (C) Heroin — Opioid
Heroin is a powerful and highly addictive substance classified as an opioid. It is derived from morphine and acts on the brain's opioid receptors to produce intense euphoria and pain relief. Because of its extreme potential for abuse and the severe health risks associated with its use, heroin is strictly prohibited and carries heavy legal penalties for possession and trafficking under the NDPS Act.

100. (D) Eustress — Negative and damaging stress
In health psychology, stress is categorized into different types based on its impact on the individual. While distress refers to negative stress that causes anxiety and harm, eustress represents positive stress that motivates and energizes people to achieve their goals. Identifying these differences helps in understanding how various stressors affect mental and physical health during challenging life events and daily workplace demands.

services and social security programs to support them.

53. (C) Inconsistent discipline causing delinquency.
Family dynamics play a critical role in the development of juvenile behavior. Inconsistent discipline, where rules are either too lax or unpredictably harsh, can confuse children and lead to delinquent actions. A stable environment with clear, fair boundaries and supportive parental guidance is essential for preventing minors from engaging in illegal behavior or seeking validation from negative peer groups.

54. (B) Mental health is unaffected by long-term daily hassles.
Daily hassles are minor but persistent stressors that can have a cumulative negative impact on mental health. While they may seem insignificant individually, long-term exposure to these irritations can lead to chronic stress, anxiety, and even clinical depression. Recognizing the impact of everyday demands is important for developing effective coping strategies that maintain long-term psychological well-being and overall resilience.

55. (D) Loneliness — Psychological problem of aged
Loneliness is a major psychological challenge faced by the elderly, often resulting from social isolation, the loss of a spouse, or the transition to nuclear family structures. This emotional state can lead to severe mental health issues, such as depression. Addressing loneliness through community engagement and social support is vital for improving the overall quality of life for senior citizens.

56. (A) Economic effect — High savings rate
Drug addiction typically leads to severe economic problems, including the depletion of savings and the loss of regular income due to decreased productivity. Far from resulting in a high savings rate, addiction often causes individuals to divert their financial resources toward purchasing substances. This financial instability affects not only the user but also their entire family, leading to long-term economic hardship.

57. (C) Mandatory death penalty for heinous crimes.
The Juvenile Justice Act of 2015 focuses on the care, protection, and rehabilitation of children. It establishes Juvenile Justice Boards and Child Welfare Committees and includes provisions for the legal adoption of orphaned children. Crucially, the Act does not prescribe the death penalty for juveniles, reflecting the principle that the system should aim for reform and reintegration rather than ultimate punishment.

58. (A) Type of stress harmful to the body and mind.
Distress is a negative form of stress that occurs when an individual feels overwhelmed by demands and unable to cope. Unlike eustress, which can be motivating, distress leads to anxiety, physical illness, and psychological exhaustion. If left unmanaged, chronic distress can significantly damage both physical and mental health, making it a critical focus in the field of health psychology.

59. (D) Emotion-focused coping
Using techniques like deep breathing and meditation to manage work pressure is a form of emotion-focused coping. These methods aim to reduce the internal feelings of stress and anxiety rather than directly changing the external work situation. By regulating their emotional response, individuals can maintain their composure and better handle the psychological demands of high-pressure environments in their professional lives.

60. (C) Statement I is correct but Statement II is incorrect.
The Narcotic Drugs and Psychotropic Substances Act was amended to introduce stricter penalties for drug trafficking to curb the illegal trade. However, the Act does not ignore the rehabilitation of addicts; it specifically includes provisions for the medical treatment and social reform of those suffering from addiction. This dual approach aims to punish traffickers while providing a path to recovery for users.

61. (C) Getting stuck in heavy traffic going to work.
Daily hassles are the minor, everyday irritations that can cause stress over time. Getting stuck in heavy traffic is a classic example, as it is a frequent occurrence that requires patience and can lead to frustration. While less severe than major life events, the cumulative effect of such daily demands can significantly impact an individual's overall stress levels and mental well-being.

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10. Which source is considered the 'nursery' of a child's value system?
(A) Family and upbringing
(B) Mass media
(C) Political parties
(D) Judicial systems

11. Which of the following is the correct pair of terminal and instrumental value types?
(A) Terminal values — Modes of conduct
(B) Instrumental values — End-states of existence
(C) Instrumental values — Short-term impulses
(D) Terminal values — End-states of existence

12. Consider the following statements regarding 'Values':
1. Values are learned through socialization and experience.
2. Values remain completely identical across all cultures without variation.
3. Values influence the way individuals perceive and interpret reality.

Which of the above statement(s) is/are correct?
(A) 1 and 2 only
(B) 2 and 3 only
(C) 1 and 3 only
(D) 1, 2, and 3

13. In the classification of values by dominant interests, which value is characterized by a dominant interest in the discovery of truth?
(A) Economic value
(B) Aesthetic value
(C) Theoretical value
(D) Religious value

14. How does education serve as a source of values?
(A) By providing necessary physiological nutrition for growth.
(B) By isolating the individual from the broader community groups.
(C) By focusing solely on the development of physical strength.
(D) Through the hidden curriculum and formal instruction.

15. Match List-I (Value Type) with List-II (Example):
List I: (Value Type)
P. Terminal Value
Q. Instrumental Value
R. Aesthetic Value
S. Economic Value
List II: (Example)
1. Honesty
2. A world at peace
3. Utility and wealth
4. Beauty and harmony
(A) P-2, Q-1, R-4, S-3
(B) P-1, Q-2, R-3, S-4
(C) P-4, Q-3, R-2, S-1
(D) P-3, Q-4, R-1, S-2

16. Which of the following is an example of an 'Instrumental Value'?
(A) National security
(B) Self-controlled
(C) Wisdom
(D) Happiness

17. Which Indian value emphasizes the performance of one's duty without attachment to the results?
(A) Collectivism
(B) Dharma
(C) Karma
(D) Individualism

18. The following question consists of two statements — Assertion (A) and Reason (R). Answer the question by selecting the appropriate option.
Assertion (A): Values are more central and stable than attitudes.
Reason (R): Values serve as the underlying foundations upon which specific attitudes are built.
(A) Both A and R are true and R is the correct explanation of A.
(B) Both A and R are true but R is not the correct explanation of A.
(C) A is true but R is false.
(D) A is false but R is true.

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19. Which of the following is NOT a core feature of Indian values?
(A) Collectivism
(B) Karma
(C) Extreme Individualism
(D) Dharma

20. What occurs during 'intrapersonal value conflict'?

99. Which of the following is an EXCEPTION to the 'Affective' component of attitude?
(A) Feelings of joy
(B) Feelings of anger
(C) Belief that a policy is efficient
(D) Feelings of dislike

100. The 'ABC' model is primarily used to describe:
(A) The process of value conflict.
(B) The steps of the Likert scale.
(C) The hierarchy of terminal values.
(D) The three components of an attitude.

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(D) A is false but R is true.

29. Which of the following is the correct pair of attitude components?
(A) Affective — Thoughts and beliefs
(B) Cognitive — Feelings and emotions
(C) Behavioral — Predisposition to act
(D) ABC Model — Attention, Belief, Commitment

30. Which of the following is an EXCEPTION to the nature of attitudes?
(A) Maintaining a relatively stable and enduring psychological position.
(B) Being learned through social experience and interaction over time.
(C) Possessing an evaluative and judgmental nature toward objects.
(D) Being essentially permanent and resisting any form of modification.

31. A citizen believes that "cleanliness is vital for health" (Cognitive), feels disgusted by litter (Affective), and participates in a community cleanup (Behavioral). This is an example of:
(A) Attitude Consistency (ABC Model)
(B) Cognitive Dissonance
(C) Operant Conditioning
(D) Semantic Differential

32. Consider the following statements about Attitude Formation:
1. Classical conditioning involves associating a neutral stimulus with an emotional stimulus.
2. Operant conditioning occurs when attitudes are reinforced by rewards or punishments.
3. Observational learning suggests attitudes are formed by watching others.

Which of the above statement(s) is/are correct?
(A) 1 and 2 only
(B) 2 and 3 only
(C) 1 and 3 only
(D) 1, 2, and 3

33. Which function of attitude helps an individual organize and simplify their understanding of the complex world?
(A) Ego-defensive function
(B) Knowledge function
(C) Value-expressive function
(D) Utilitarian function

34. Which of the following is NOT one of the three components of the ABC model of attitude?
(A) Biological
(B) Affective
(C) Behavioral
(D) Cognitive

35. Match List-I (Scale) with List-II (Key Feature):
List I: (Scale)
P. Likert Scale
Q. Thurstone Scale
R. Semantic Differential
S. Ranking Survey
List II: (Key Feature)
1. Equal-appearing intervals
2. Summated ratings (e.g., Strongly Agree to Strongly Disagree)
3. Bipolar adjectives (e.g., Good-Bad)
4. Ranking of Terminal and Instrumental values
(A) P-2, Q-1, R-3, S-4
(B) P-1, Q-2, R-4, S-3
(C) P-3, Q-4, R-1, S-2
(D) P-4, Q-3, R-2, S-1

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36. Which function of attitude allows a person to protect their self-esteem or justify actions that make them feel guilty?
(A) Utilitarian function
(B) Knowledge function
(C) Value-expressive function
(D) Ego-defensive function

37. What is the core concept of the Cognitive Dissonance theory?
(A) The belief that people enjoy having deeply contradictory beliefs.
(B) The idea that attitudes are changed only through physical force.
(C) Tension arising from inconsistency between behavior and attitudes.
(D) The state where dissonance occurs when a person has no attitudes.

38. The following question consists of two statements — Assertion (A) and Reason (R). Answer the question by selecting the appropriate option.
Assertion (A): People often change their

(A) A verbal disagreement between two different people over social norms.
(B) A conflict between an individual's personal desires and the law.
(C) A political conflict occurring between two or more different nations.
(D) A clash between multiple values held by the same individual.

21. If a person values 'Environmental Protection' as a terminal value but works for a polluting industry to earn money, what is they likely experiencing?
(A) Cultural Universality
(B) Operant Conditioning
(C) Value Conflict
(D) Semantic Differential

22. Consider the following statements regarding value surveys that categorize terminal and instrumental values:
1. They consist of 18 terminal values.
2. They consist of 18 instrumental values.
3. Respondents are asked to rank values in order of importance.

Which of the above statement(s) is/are correct?
(A) 1 and 2 only
(B) 1 and 3 only
(C) 2 and 3 only
(D) 1, 2, and 3

23. Which term refers to the belief that every action has a corresponding consequence, influencing moral behavior in Indian thought?
(A) Dharma
(B) Collectivism
(C) Instrumentalism
(D) Karma

24. What is the relationship between values and behavior?
(A) Values serve as internal guides providing standards for behavior.
(B) There is no functional link between what a person values and actions.
(C) Behavior is always entirely random and never influenced by values.
(D) Values are only expressed in verbal speech and never in physical act.

25. Match List-I (Term) with List-II (Description):

List I: (Term)
P. Collectivism
Q. Interpersonal Conflict
R. Social Comparison
S. Terminal Value

List II: (Description)
1. Clash between two different individuals' values
2. Priority to group goals over individual goals
3. Evaluating one's beliefs against others
4. A desired end-state of existence

(A) P-2, Q-1, R-3, S-4
(B) P-1, Q-2, R-4, S-3
(C) P-3, Q-4, R-1, S-2
(D) P-4, Q-3, R-2, S-1

26. Which component of attitude involves an individual's emotions or feelings toward an object?
(A) Affective component
(B) Cognitive component
(C) Behavioral component
(D) Evaluative component

27. Read the following statements and select the correct option.
Statement I: Attitudes are learned dispositions and are not innate.
Statement II: Attitudes are always neutral and never carry a positive or negative valence.
(A) Both statements are correct.
(B) Statement I is correct, Statement II is incorrect.
(C) Statement I is incorrect, Statement II is correct.
(D) Both statements are incorrect.

28. The following question consists of two statements — Assertion (A) and Reason (R). Answer the question by selecting the appropriate option.
Assertion (A): Peer groups are a significant source of attitude formation during adolescence.
Reason (R): Individuals have a strong desire to be accepted and use social comparison to align their views with the group.
(A) Both A and R are true and R is the correct explanation of A.
(B) Both A and R are true but R is not the correct explanation of A.
(C) A is true but R is false.

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(A) Allowing positive expression of central values and self-identity.
(B) Using attitudes as a method for hiding one's true self from others.
(C) Using attitudes to maximize physical utility and gain in all areas.
(D) Using specific attitudes to avoid all forms of social interaction.

48. The following question consists of two statements — Assertion (A) and Reason (R). Answer the question by selecting the appropriate option.
Assertion (A): Attitudes do not always predict behavior.
Reason (R): External situational constraints and the strength of the attitude influence the attitude-behavior consistency.
(A) Both A and R are true and R is the correct explanation of A.
(B) Both A and R are true but R is not the correct explanation of A.
(C) A is true but R is false.
(D) A is false but R is true.

49. Which attitude measurement scale uses pairs of bipolar adjectives?
(A) Likert scale
(B) Semantic differential scale
(C) Thurstone scale
(D) Guttman scale

50. Which of the following is an INCORRECT statement about the 'Cognitive' component of attitude?
(A) It is the emotional reaction to an object.
(B) It includes the knowledge a person has about an object.
(C) It includes the beliefs held by the individual.
(D) It forms the basis of the beliefs in an attitude.

51. Which of the following is an EXCEPTION to the common features of attitudes?
(A) Being evaluative and judgmental in nature.
(B) Being relatively enduring and stable over time.
(C) Being purely innate and present at birth.
(D) Influencing how people behave in various settings.

52. Consider the following statements regarding 'Social Comparison':
1. People look to others to determine if their attitudes are "correct."
2. It is a major source of attitude formation.
3. It only happens between people of different generations.
Which of the above statement(s) is/are correct?
(A) 1 and 2 only
(B) 2 and 3 only
(C) 1 and 3 only
(D) 1, 2, and 3

53. Which concept explains why a person might feel uncomfortable after buying an expensive car they cannot afford, leading them to search for positive reviews of the car?
(A) Observational learning
(B) Classical conditioning
(C) Cognitive dissonance
(D) Semantic differential

54. Which of the following is the most appropriate description of a 'learned disposition'?
(A) A behavior that is entirely genetically programmed at birth.
(B) A tendency to respond acquired through experience.
(C) A random response to a completely new and unknown stimulus.
(D) An instinctive reflex like blinking when a bright light is seen.

55. Match List-I (Value Source) with List-II (Context):
List I: (Value Source)
P. Family
Q. Media
R. Religion
S. Education
List II: (Context)
1. Moral codes and sanctity
2. Primary socialization and basic trust
3. Dissemination of social norms and trends
4. Systematic learning and civic values
(A) P-2, Q-3, R-1, S-4
(B) P-1, Q-2, R-4, S-3
(C) P-4, Q-1, R-3, S-2
(D) P-3, Q-4, R-2, S-1

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attitudes to reduce cognitive dissonance.
Reason (R): Humans have a fundamental drive for consistency among their cognitions and behaviors.
(A) Both A and R are true and R is the correct explanation of A.
(B) Both A and R are true but R is not the correct explanation of A.
(C) A is true but R is false.
(D) A is false but R is true.

39. Which of the following is an INCORRECT pair regarding attitude measurement?
(A) Semantic Differential — Bipolar Adjectives
(B) Likert — 5 or 7 point scale
(C) Thurstone — Method of equal-appearing intervals
(D) Dissonance — Observational Learning Scale

40. Which of the following is the best description of the 'Utilitarian' function of attitude?
(A) Gaining rewards and avoiding punishments from the environment.
(B) Expressing one's central values and core identity through behavior.
(C) Simplifying the complex world into manageable social categories.
(D) Protecting the individual's ego from internal stress and conflict.

41. Read the following statements and select the correct option.
Statement I: Stereotypes are overgeneralized beliefs about a group of people.
Statement II: Stereotypes represent the affective component of prejudice.
(A) Both statements are correct.
(B) Statement I is correct, Statement II is incorrect.
(C) Statement I is incorrect, Statement II is correct.
(D) Both statements are incorrect.

42. Consider the following statements regarding 'Discrimination':
1. It is the behavioral manifestation of prejudice.
2. It involves treating people unfairly based on their group membership.
3. It is purely a cognitive process and does not involve action.

Which of the above statement(s) is/are correct?
(A) 1 and 2 only
(B) 2 and 3 only
(C) 1 and 3 only
(D) 1, 2, and 3

43. Which term refers to a preconceived negative judgment of a group and its individual members?
(A) Stereotype
(B) Value
(C) Dissonance
(D) Prejudice

44. Which process of attitude formation involves learning through the consequences of one's actions, such as rewards or punishments?
(A) Classical conditioning
(B) Operant conditioning
(C) Social comparison
(D) Genetic inheritance

45. Match List-I (Concept) with List-II (Definition):
List I: (Concept)
P. Stereotype
Q. Prejudice
R. Discrimination
S. Attitude
List II: (Definition)
1. Negative attitude toward a group
2. Unjustifiable negative behavior
3. Generalized belief about a group
4. Evaluative disposition toward an object
(A) P-3, Q-1, R-2, S-4
(B) P-1, Q-2, R-3, S-4
(C) P-4, Q-3, R-1, S-2
(D) P-2, Q-4, R-3, S-1

46. What is the primary focus of the 'Persuasion route' to attitude change?
(A) Using physical force to change an individual's external behavior.
(B) Changing attitudes through communication and messaging.
(C) Ignoring the audience's existing beliefs during the interaction.
(D) Reducing the overall stability of internal values in a population.

47. Which of the following is the correct statement regarding the 'Value-expressive' function?

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(D) Karma — Righteous duty

66. Which of the following represents an INCORRECT pair of attitude functions?
(A) Value-expressive — Hiding personal beliefs
(B) Knowledge — Providing meaning
(C) Ego-defensive — Enhancing self-image
(D) Utilitarian — Maximizing rewards

67. Which of the following is an EXCEPTION to the standard 'Sources of Values'?
(A) Culture and upbringing
(B) Education and schools
(C) Random genetic mutation
(D) Peer groups and media

68. What is the most appropriate term for a stable, evaluative belief that guides our preferences?
(A) Emotion
(B) Perception
(C) Reflex
(D) Value

69. An individual likes a political leader (Affective) because they believe the leader's policies will improve the economy (Cognitive). This internal logic represents:
(A) Attitude-Behavior inconsistency
(B) Value conflict
(C) The structure of an attitude
(D) Discrimination

70. Read the following statements and select the correct option.
Statement I: The Likert Scale is a method of summated ratings.
Statement II: The Thurstone Scale is easier to construct than the Likert Scale.
(A) Both statements are correct.
(B) Statement I is correct, Statement II is incorrect.
(C) Statement I is incorrect, Statement II is correct.
(D) Both statements are incorrect.

71. Arrange the following in the correct sequence of how attitudes translate into action:
1. Stereotype (Cognitive)
2. Prejudice (Affective)
3. Discrimination (Behavioral)
(A) 1-2-3
(B) 3-2-1
(C) 2-1-3
(D) 1-3-2

72. If a student studies hard because they value 'Self-improvement' as a terminal goal and believe 'Ambition' as an instrumental value is the way to get there, they are applying:
(A) A system of terminal and instrumental values
(B) Religious value classification
(C) Dissonance theory
(D) Classical Conditioning

73. Which of the following is a negative feature of stereotypes?
(A) The scientific verification of group traits.
(B) The idea that they are based on rigorous scientific evidence.
(C) Ignoring individual differences within a group.
(D) The claim that they are highly flexible and change on a daily basis.

74. Which of the following individuals is associated with the development of the theory of Cognitive Dissonance?
(A) Leon Festinger
(B) Gordon Allport
(C) Milton Rokeach
(D) Louis Thurstone

75. Which of the following is the correct statement about 'Interpersonal Value Conflict'?
(A) It occurs within a person's own mind during a hard choice.
(B) It is always resolved by the government or a judicial body.
(C) It has nothing to do with values or internal belief systems.
(D) Occurring between people with differing value systems.

76. Which of the following is an INCORRECT statement regarding 'Attitude-Behavior consistency'?
(A) Specific attitudes predict specific behaviors better than general ones.
(B) Attitudes and behavior are always perfectly aligned in every situation.
(C) Situational pressure can prevent a person

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from acting on their attitude.
(D) Strong attitudes are better predictors of behavior.

77. Which of the following is the correct pair of attitude measurement techniques?
(A) Thurstone — Bipolar adjectives
(B) Semantic Differential — Equal appearing intervals
(C) Likert — Strongly Agree to Strongly Disagree
(D) Value Survey — Operant conditioning

78. Which of the following is an INCORRECT pair of elements within the ABC model of attitude?
(A) A — Affective (Feelings)
(B) B — Behavioral (Actions)
(C) C — Cognitive (Beliefs)
(D) C — Conditioning (Learning)

79. Which of the following is an EXCEPTION to the nature of Indian values?
(A) Complete rejection of social hierarchy
(B) Respect for elders
(C) Emphasis on 'Dharma'
(D) Belief in 'Karma'

80. Why is the family considered a primary source of values?
(A) Because families provide financial support to all members.
(B) Values are formed during impressionable childhood years.
(C) Because families are the only source of formal education.
(D) Because the law requires it for social order and stability.

81. A person who values 'Honesty' finds themselves in a situation where they must lie to save a friend's job. This situation is an example of:
(A) Value Consensus
(B) Value Conflict
(C) Value Universality
(D) Value Hierarchy

82. Read the following statements and select the correct option.
Statement I: Classical conditioning in attitude formation involves the use of reinforcement.
Statement II: Operant conditioning involves the association of two stimuli.
(A) Both statements are correct.
(B) Statement I is correct, Statement II is incorrect.
(C) Statement I is incorrect, Statement II is correct.
(D) Both statements are incorrect.

83. Using 'Good' vs 'Bad' and 'Strong' vs 'Weak' scales to measure an attitude toward "Public Service" is an application of which scale?
(A) Likert Scale
(B) Thurstone Scale
(C) Semantic Differential Scale
(D) Ranking Survey

84. What is meant by the 'Cultural Universality' of values?
(A) The idea that all cultures have the same laws and rules.
(B) The claim that values do not exist in some isolated groups.
(C) The belief that values are only found in specific regions.
(D) Basic values like 'kindness' found in most human societies.

85. Which of the following is a correct statement about 'Instrumental Values'?
(A) They are the ultimate and final goals of life for all.
(B) They are significantly less stable than personal opinions.
(C) Modes of behavior used to reach terminal values.
(D) They are irrelevant to hierarchical value systems today.

86. Which of the following is an INCORRECT statement about 'Attitudes'?
(A) They can be positive, negative, or neutral.
(B) They are permanent and cannot be changed.
(C) They involve a predisposition to respond.
(D) They are learned.

87. Which of the following is the correct pair of attitude formation types?
(A) Observational Learning — Learning through direct punishment
(B) Social Comparison — Learning through physical exercise

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(C) Operant Conditioning — Learning through reading books only
(D) Classical Conditioning — Learning through association

88. Which of the following is an INCORRECT pair of value types based on dominant interests?
(A) Aesthetic — Power and influence
(B) Theoretical — Discovery of truth
(C) Economic — Utility and practical affairs
(D) Religious — Unity and cosmos

89. Which of the following is an EXCEPTION to the functions of attitudes?
(A) Knowledge function
(B) Ego-defensive function
(C) Biological regulation function
(D) Utilitarian function

90. Cognitive Dissonance is most likely to occur when:
(A) An individual holds two contradictory cognitions.
(B) An individual's beliefs and actions are in harmony.
(C) An individual has no opinion on a topic.
(D) An individual performs a routine task that aligns with their values.

91. To change a person's negative attitude toward a new policy, a spokesperson uses logical arguments and data. This is an example of:
(A) Classical conditioning
(B) Discrimination
(C) Value Conflict
(D) Persuasion

92. Read the following statements and select the correct option.
Statement I: Prejudice is the cognitive component of an antagonistic attitude.
Statement II: Stereotype is the affective component of an antagonistic attitude.
(A) Both statements are correct.
(B) Statement I is correct, Statement II is incorrect.
(C) Statement I is incorrect, Statement II is correct.
(D) Both statements are incorrect.

93. In a collectivist culture, an individual is likely to:
(A) Put their own needs above those of the entire family.
(B) Ignore social norms and community expectations entirely.
(C) Decide based on group harmony and social duty.
(D) Avoid any form of social interaction with other people.

94. What is 'Dharma' in the context of Indian values?
(A) Physical wealth
(B) Social status
(C) Personal pleasure
(D) Righteousness and moral duty

95. Which of the following is a correct statement about 'Social Comparison' in attitude formation?
(A) Looking to others to validate one's own opinions and beliefs.
(B) Comparing one's physical height and weight with group members.
(C) A method of measuring attitudes using a standardized digital scale.
(D) A process that only occurs in absolute social isolation of self.

96. Which of the following is an INCORRECT statement about the 'Likert Scale'?
(A) It is a method of summated ratings.
(B) It is a type of 'equal-appearing interval' scale.
(C) It usually uses a 5-point response format.
(D) It measures the intensity of agreement or disagreement.

97. Which of the following is a correct pair of attitude types and behaviors?
(A) Negative attitude — Approach behavior
(B) Positive attitude — Approach behavior
(C) Neutral attitude — Strong emotional reaction
(D) Positive attitude — Avoidance behavior

98. Which of the following is an INCORRECT pair of terminal and instrumental values?
(A) Terminal — Obedient
(B) Terminal — A comfortable life
(C) Instrumental — Broad-minded
(D) Instrumental — Imaginative

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56. A manager treats a female employee differently because he believes women are not good at leadership. This action of treating her differently is an example of:
(A) Discrimination
(B) Stereotype
(C) Prejudice
(D) Cognitive Dissonance

57. Read the following statements and select the correct option.
Statement I: Values are the goals (ends), while attitudes are the orientations toward those goals.
Statement II: Values are more specific than attitudes.
(A) Both statements are correct.
(B) Statement I is correct, Statement II is incorrect.
(C) Statement I is incorrect, Statement II is correct.
(D) Both statements are incorrect.

58. The following question consists of two statements — Assertion (A) and Reason (R). Answer the question by selecting the appropriate option.
Assertion (A): In Indian culture, collectivism is a dominant value.
Reason (R): Indian social structure traditionally prioritizes family and community welfare over individual desires.
(A) Both A and R are true and R is the correct explanation of A.
(B) Both A and R are true but R is not the correct explanation of A.
(C) A is true but R is false.
(D) A is false but R is true.

59. Which of the following is an example of 'Observational Learning' in attitude formation?
(A) A child being grounded for using a bad word in public.
(B) An adult changing their mind after a long logical debate.
(C) A baby crying instinctively when they are hungry or tired.
(D) Adopting the views of a favorite celebrity.

60. What is the 'Semantic Differential Scale' primarily designed to measure?
(A) The total number of values a person holds during childhood.
(B) The connotative meaning of objects and concepts.
(C) The biological intensity of an emotion during a social event.
(D) The physical distance between social groups in an urban area.

61. Arrange the following steps of 'Attitude Change through Persuasion' in a logical sequence:
1. Reception of the message
2. Attention to the message
3. Retention of the message
4. Yielding/Acceptance of the message
(A) 2-1-4-3
(B) 1-2-3-4
(C) 4-3-2-1
(D) 2-4-1-3

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62. Which classification system categorizes values into Economic, Aesthetic, Social, Political, and Religious types?
(A) Rokeach's classification
(B) Festinger's classification
(C) Likert's classification
(D) Allport's classification

63. Which of the following is a correct statement about 'Terminal Values'?
(A) Lifelong goals an individual wants to achieve.
(B) They are the tools used to achieve specific goals.
(C) They are temporary and change weekly based on moods.
(D) They are less important than instrumental values today.

64. Which of the following is an INCORRECT statement regarding 'Prejudice'?
(A) It is usually based on stereotypes.
(B) It is an affective or evaluative response.
(C) It can lead to discrimination.
(D) It is always based on direct, personal experience with every member of a group.

65. Which of the following is the correct pair of Indian value and its definition?
(A) Dharma — Cycle of rebirth
(B) Karma — Action and consequence
(C) Collectivism — Supremacy of the individual

ANSWERS

1. (B) Enduring beliefs about preferable modes of conduct.
   Values are core beliefs that provide a stable framework for an individual's behavior and life choices. Unlike temporary feelings or short-term biases, they represent enduring convictions about what is desirable or preferable in personal and social conduct. They serve as internal standards that guide judgment and action consistently over long periods of time.

2. (A) Assigning goodness or badness to an object or behavior.
   The evaluative dimension is a fundamental characteristic of values that involves making judgments about the desirability of objects, actions, or ideas. It allows individuals to categorize experiences and behaviors on a scale of good to bad or right to wrong. This judgmental aspect is what distinguishes values from purely factual beliefs or observations.

3. (C) Stability and endurance.
   Values are characterized by their relative stability and endurance throughout an individual's life. While they can be influenced by significant life experiences, they are not easily changed compared to transient opinions or moods. This durability ensures that values provide a consistent internal guide for behavior, helping individuals maintain a sense of personal identity and social continuity.

4. (D) Ranking values based on their relative importance.
   Humans organize their values into a hierarchical structure where certain beliefs are prioritized over others. This ranking system is crucial when individuals face situations where two or more values conflict. By determining the relative importance of different values, a person can make consistent decisions and resolve internal dilemmas based on their established priority of moral standards.

5. (C) Values are biological traits inherited through human DNA.
   Values are essentially psychological and social constructs learned through interaction with one's environment and culture. They are not innate biological traits or genetically inherited characteristics. Instead, they are acquired through socialization processes involving family, education, and religion. This distinguishes them from physical attributes or reflexes that are strictly determined by human genetics and biological evolution.

6. (B) Media — Peer-to-peer biological inheritance.
   Media functions as a powerful source of socialization by disseminating information, social norms, and cultural trends to a broad audience. It does not involve biological inheritance, which refers to the genetic transmission of traits from parents to offspring. The influence of media on value systems is environmental and cognitive rather than a process of physical or hereditary transfer.

7. (D) Helping individuals resolve conflicts between competing values.
   The hierarchical organization of values allows individuals to navigate complex social situations where different moral standards may clash. By ranking values in terms of importance, people can identify which principle should take precedence during a conflict. This internal ordering provides a clear framework for decision-making, ensuring that actions remain aligned with the most deeply held personal convictions.

8. (A) Cultural universality and variation.
   Certain core values are recognized across most human societies, demonstrating a level of cultural universality. However, the specific ways these values are expressed and prioritized can vary significantly between different cultures. For instance, while honesty is a global value, the social protocols or contexts in which it is emphasized may differ based on unique cultural traditions and histories.

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81. (B) Value Conflict.
This scenario illustrates a value conflict where an individual's deeply held value of honesty clashes with the value of loyalty or compassion toward a friend. The person must choose between two competing moral principles, leading to internal psychological tension. Such conflicts are common in complex ethical situations where there is no easy solution that satisfies all of a person's core values.

82. (D) Both statements are incorrect.
Both statements are incorrect because they swap the definitions of the conditioning types. Classical conditioning involves the association of two stimuli to create a response, such as linking a neutral brand with a pleasant song. Operant conditioning, on the other hand, involves the use of reinforcement (rewards or punishments) to shape behavior or attitudes based on the consequences of an action.

83. (C) Semantic Differential Scale.
Using opposing terms like 'good' vs 'bad' and 'strong' vs 'weak' is the defining characteristic of the semantic differential scale. This method measures the connotative meaning of an attitude toward a concept like public service. By placing their response on a continuum between these bipolar adjectives, individuals provide a nuanced picture of their evaluative, potency, and activity perceptions of the object.

84. (D) Basic values like 'kindness' found in most human societies.
Cultural universality refers to the observation that certain core values, such as kindness, honesty, and respect for life, are present in almost all human societies regardless of their geographic location or history. While the specific application or priority of these values may change across cultures, their fundamental existence suggests a common human ethical foundation that transcends specific cultural boundaries.

85. (C) Modes of behavior used to reach terminal values.
Instrumental values are the preferred modes of behavior or traits that individuals adopt as means to achieve their broader life goals. Examples include being courageous, helpful, or logical. These values serve as tools or instruments in the pursuit of terminal values, which are the ultimate end-states of existence. Together, they form a comprehensive system that guides both day-to-day actions and long-term aspirations.

86. (B) They are permanent and cannot be changed.
Attitudes are relatively stable and enduring, but they are not permanent. They can be modified through new information, changes in social environment, or persuasive communication. Declaring that they cannot be changed is incorrect, as individuals frequently update their evaluations based on new experiences. This adaptability is essential for learning and successfully navigating the changing social and political landscapes of life.

87. (D) Classical Conditioning — Learning through association.
Classical conditioning is correctly paired with learning through association, where a neutral stimulus becomes linked with an emotional response. Other pairs are incorrect: observational learning involves imitation rather than direct punishment, social comparison involves validating views against others rather than physical exercise, and operant conditioning relies on reinforcement like rewards and punishments rather than only reading books or intellectual study.

88. (A) Aesthetic — Power and influence.
The aesthetic value is characterized by an interest in beauty, form, and harmony, whereas the pursuit of power and influence is associated with political values. The other pairs are correct: theoretical values focus on the discovery of truth, economic values on utility and practical affairs, and religious values on the search for unity and understanding of the cosmic order.

89. (C) Biological regulation function.
Attitudes serve several psychological functions, including the knowledge function for understanding the world, the ego-defensive function for protecting self-esteem, and the utilitarian function for gaining rewards. However, biological regulation, such as maintaining body temperature or heart rate, is a physiological process rather than a function of learned attitudes. Attitudes are psychological

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that provide a general framework for judgment. Specific attitudes toward objects or situations are often derived from these deeper, more enduring values. Therefore, values act as the underlying bedrock upon which a person builds their specific evaluations and responses to the external world.

19. (C) Extreme Individualism.
Indian values traditionally emphasize collective welfare, duty, and spiritual growth rather than extreme individualism. While some cultures may prioritize individual autonomy, Indian social thought focuses on concepts like karma, which relates to action and consequence, and dharma, which relates to moral duty within a group. Social structures in India typically highlight family and community harmony.

20. (D) A clash between multiple values held by the same individual.
Intrapersonal value conflict occurs within an individual's own mind when they hold two or more values that suggest different courses of action. For example, a person may value both career success and family time, leading to internal tension when choosing between a promotion and personal life. This conflict requires the individual to prioritize their values to make a decision.

21. (C) Value Conflict.
Value conflict occurs when an individual's behavior contradicts their deeply held values or when two competing values clash in a specific situation. In this scenario, the commitment to environmental protection is undermined by the necessity of earning a living through a polluting industry. This discrepancy creates psychological tension, as the person's professional actions are not aligned with their personal standards.

22. (D) 1, 2, and 3.
Standard value surveys, such as the Rokeach Value Survey, categorize values into 18 terminal values and 18 instrumental values. Respondents are asked to rank these values in order of their relative importance to their own lives. This ranking methodology reveals the hierarchical structure of an individual's value system, helping researchers understand the priorities that guide personal and social behavior.

23. (D) Karma.
Karma is a fundamental concept in Indian thought that refers to the law of cause and effect. It suggests that every intentional action performed by an individual has a corresponding consequence, either in the current life or future existences. This belief influences moral behavior by encouraging individuals to act ethically, as they believe their deeds will determine their future wellbeing.

24. (A) Values serve as internal guides providing standards for behavior.
Values function as internal blueprints that provide standards for evaluating and directing human behavior. They help individuals decide what actions are appropriate or desirable in various social contexts. By serving as a consistent reference point, values ensure that behavior is not merely reactive to external stimuli but is instead driven by an underlying sense of purpose and ethical conviction.

25. (A) P-2, Q-1, R-3, S-4.
Collectivism prioritizes group goals over individual desires, while interpersonal conflict involves a clash between the values of different people. Social comparison is the process of evaluating one's beliefs against others to ensure their validity. A terminal value represents a desired end-state of existence, such as freedom or happiness, which individuals strive to achieve throughout their entire lives.

26. (A) Affective component.
The affective component of an attitude encompasses the emotional reactions, feelings, and moods an individual has toward a specific object, person, or issue. This part of the attitude structure determines whether the evaluation is positive, negative, or neutral based on feelings like joy, fear, or disgust. It works alongside cognitive beliefs and behavioral tendencies to form a complete attitude.

27. (B) Statement I is correct, Statement II is incorrect.
Attitudes are learned dispositions acquired through experience and socialization rather than being innate or present at birth. Contrary to being neutral, attitudes always carry a specific valence, meaning they involve a positive, negative, or

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63. (A) Lifelong goals an individual wants to achieve.
Terminal values represent the ultimate objectives or desirable end-states that an individual strives to achieve throughout their entire life. Examples include inner peace, freedom, and happiness. These goals are relatively stable and serve as a long-term guiding force for personal development. They differ from instrumental values, which are the specific behaviors or means used to reach these final outcomes.

64. (D) It is always based on direct, personal experience with every member of a group.
Prejudice is characterized by preconceived judgments that are often formed without any direct or personal experience with the members of a group. Instead, these negative attitudes are frequently based on overgeneralized stereotypes or social learning from one's environment. Because it is a generalization, prejudice unfairly categorizes all individuals within a group regardless of their actual personal traits or behaviors.

65. (B) Karma — Action and consequence.
Karma is correctly defined in Indian philosophy as the principle of action and its subsequent consequence. This value emphasizes that every deed has a moral weight and results in a specific outcome for the individual. While Dharma refers to righteous duty and Collectivism focuses on group harmony, Karma specifically highlights the causal link between human behavior and its long-term ethical effects.

66. (A) Value-expressive — Hiding personal beliefs.
The value-expressive function of an attitude is intended to allow an individual to openly demonstrate and validate their core values and self-identity. It is the opposite of hiding personal beliefs; rather, it serves as a vehicle for projecting one's true convictions to the social world. This function helps maintain psychological integrity by ensuring that outward attitudes are consistent with inner standards.

67. (C) Random genetic mutation.
Values are primarily psychological and social constructs learned through environmental sources such as family, culture, education, and peer groups. They are not the result of random genetic mutations or biological inheritance. While biology may influence some temperamental traits, the specific content of a person's value system is shaped by socialization and the cultural context in which they are raised.

68. (D) Value.
A value is defined as a stable, enduring, and evaluative belief that guides an individual's preferences and behavior. Unlike transient emotions or instinctive reflexes, values provide a consistent internal standard for judging what is important or desirable. They are more central and durable than attitudes or perceptions, forming the fundamental core of a person's character and social orientation.

69. (C) The structure of an attitude.
The structure of an attitude is composed of cognitive, affective, and behavioral elements. In this example, the belief that the leader's policies will help the economy represents the cognitive component, while the liking of the leader represents the affective component. These components work together to form a coherent psychological evaluation, illustrating how thoughts and feelings combine to create attitudes.

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70. (B) Statement I is correct, Statement II is incorrect.
The Likert scale is indeed a method of summated ratings, where an individual's scores across multiple items are totaled to determine their attitude. However, the statement that the Thurstone scale is easier to construct is incorrect; it is actually more complex and time-consuming because it requires a panel of judges to determine the scale values for each specific item.

71. (A) 1-2-3.
Antagonistic social behaviors typically follow a sequence starting with the cognitive component. First, a stereotype (overgeneralized belief) is formed. This often leads to prejudice, which is the affective or emotional component involving negative feelings. Finally, these internal states can manifest as discrimination, which is the behavioral component involving unfair treatment or actions against members of the targeted group.

By adopting certain attitudes, people can justify their own actions or project their insecurities onto others. This psychological mechanism helps maintain a positive self-image and reduces the anxiety or guilt associated with behaviors that may contradict personal values.

37. (C) Tension arising from inconsistency between behavior and attitudes.
Cognitive dissonance is a theory suggesting that individuals experience psychological discomfort or tension when they hold two conflicting cognitions or when their behavior contradicts their attitudes. To resolve this unpleasant state, people are motivated to change their beliefs, alter their actions, or justify the inconsistency. This drive for internal consistency is a powerful motivator for attitude change and behavioral adjustment.

38. (A) Both A and R are true and R is the correct explanation of A.
Humans have a fundamental psychological need for consistency among their beliefs, attitudes, and behaviors. When an inconsistency occurs, it creates the state of cognitive dissonance, which is uncomfortable. Consequently, individuals often change their attitudes to align them with their actions or other cognitions to eliminate this tension. This process ensures that their internal mental state remains coherent and stable.

39. (D) Dissonance — Observational Learning Scale.
Cognitive dissonance is a theory explaining attitude change and internal conflict rather than a standardized scale for measuring attitudes. In contrast, the Likert and Thurstone scales are established quantitative tools for measurement, and the Semantic Differential uses bipolar adjectives. Observational learning is a process of acquiring attitudes by watching others, not a specific instrument for measuring the intensity of attitudes.

40. (A) Gaining rewards and avoiding punishments from the environment.
The utilitarian function, also known as the adjustment function, involves developing attitudes that help an individual maximize rewards and minimize punishments within their social environment. People tend to adopt attitudes that are praised by others or lead to beneficial outcomes while rejecting those that result in negative consequences. This function helps individuals adapt successfully to the expectations of their community.

41. (B) Statement I is correct, Statement II is incorrect.
Stereotypes are overgeneralized beliefs about the characteristics or traits of a group of people, representing the cognitive component of an attitude. They are not the affective component; instead, prejudice represents the emotional or affective aspect of such antagonistic attitudes. While stereotypes involve thoughts and categorizations, prejudice involves the actual feelings of dislike or hostility toward members of a group.

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42. (A) 1 and 2 only.
Discrimination is the behavioral manifestation of prejudice, involving the unfair treatment of individuals based on their group membership. It is an active process that results in tangible actions, such as exclusion or biased treatment, rather than being a purely cognitive process. While stereotypes and prejudice occur in the mind, discrimination represents the outward expression of these negative attitudes in social interactions.

43. (D) Prejudice.
Prejudice is defined as a preconceived negative judgment or evaluation of a group and its individual members. It is primarily an affective response that involves feelings of dislike or hostility toward others before having direct experience with them. Prejudice often stems from stereotypes and can lead to discriminatory behavior, forming a significant barrier to social harmony and equal treatment of individuals.

44. (B) Operant conditioning.
Operant conditioning is a learning process where attitudes and behaviors are shaped by their consequences. When an individual is rewarded for expressing a particular view, they are more likely to strengthen that attitude. Conversely, punishment for an attitude tends to weaken it. This mechanism highlights how external reinforcement from the social environment plays a crucial role in forming and maintaining attitudes.

9. (C) Triggers that lead to specific goal-directed behavior.
Values serve a vital motivational function by acting as internal catalysts for action. They guide individuals toward specific goals by defining what is worth achieving and which behaviors are appropriate to reach those ends. This proactive role ensures that human actions are not random but are instead directed toward fulfilling personal standards and meeting socially recognized objectives.

10. (A) Family and upbringing.
The family is the primary environment where a child first encounters social norms and moral standards. Parents and immediate relatives act as the first role models, teaching fundamental concepts of right and wrong during the most impressionable years. This early socialization creates a foundational value system that often persists and influences the individual throughout their entire adult life.

11. (D) Terminal values — End-states of existence.
Terminal values represent the ultimate goals or desirable end-states that an individual hopes to achieve during their lifetime. These include concepts like wisdom, happiness, or a world at peace. In contrast, instrumental values refer to the preferred modes of conduct or means used to reach those terminal goals, such as being honest, ambitious, or self-controlled in daily life.

12. (C) 1 and 3 only.
Values are primarily learned through socialization, experience, and interaction with various social institutions like family and schools. They are not identical across all cultures; rather, they vary significantly based on different social and historical contexts. Furthermore, values act as cognitive filters, deeply influencing how individuals perceive, interpret, and make sense of the reality surrounding them.

13. (C) Theoretical value.
Theoretical values are characterized by a dominant interest in the discovery of truth and the pursuit of knowledge through intellectual observation and reasoning. Individuals who prioritize these values often seek to understand the underlying principles of the world. This focus contrasts with other value types, such as economic values centered on utility or aesthetic values centered on beauty.

14. (D) Through the hidden curriculum and formal instruction.
Education transmits values through both formal instruction and the hidden curriculum. While formal lessons teach civic duties and historical perspectives, the hidden curriculum includes the unspoken norms and behaviors promoted within the school environment. These combined influences help shape a student's social and moral outlook, preparing them for responsible participation in the broader community and society.

15. (A) P-2, Q-1, R-4, S-3.
Terminal values focus on desired end-states like a world at peace, while instrumental values concern modes of conduct such as honesty. Aesthetic values emphasize the appreciation of beauty and harmony in various forms. Economic values are primarily concerned with utility, wealth, and the practical aspects of material life. These categories help classify the different interests that guide human behavior.

16. (B) Self-controlled.
Instrumental values are the specific behaviors or traits that people use as tools to achieve their life goals. Being self-controlled is a mode of conduct that helps an individual reach broader objectives like professional success or personal peace. Unlike terminal values, which represent final outcomes such as wisdom or happiness, instrumental values focus on the process and methods of action.

17. (B) Dharma.
Dharma is a central concept in Indian philosophy representing righteous duty and moral obligation. It emphasizes the importance of performing one's responsibilities according to one's social and cosmic role. A key aspect of this value is acting without being overly attached to the final results of the action, focusing instead on the ethical integrity of the performance itself.

18. (A) Both A and R are true and R is the correct explanation of A.
Values are more central and stable than attitudes because they represent foundational beliefs

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54. (B) A tendency to respond acquired through experience.
A learned disposition refers to a relatively stable tendency to respond to a stimulus in a particular way, developed through personal experience and environmental interaction. This is distinct from innate reflexes or random behaviors, as it represents a pattern of evaluation and action that has been shaped over time. Such dispositions form the basis of attitudes, which guide how people interact with society.

55. (A) P-2, Q-3, R-1, S-4.
Family is the source of primary socialization, while media disseminates social norms and current trends. Religion provides moral codes and a sense of sanctity to its followers. Education offers systematic learning and instills civic values through both formal curriculum and school culture. Together, these institutions serve as the primary conduits through which societal values are transmitted to individuals over time.

56. (A) Discrimination.
Discrimination involves the actual behavior or unfair treatment of an individual based on their membership in a specific group. In this case, the manager's action of treating the employee differently is the behavioral expression of a underlying stereotype or prejudice. While the belief is a stereotype and the negative feeling is prejudice, the act itself is classified as social discrimination.

57. (B) Statement I is correct, Statement II is incorrect.
Values are often seen as the ultimate goals or "ends" that a person strives for, while attitudes are the specific orientations or evaluations toward those goals. Values are actually more general and foundational than attitudes, which are usually more specific to certain objects or situations. For instance, a general value of equality can lead to many specific attitudes toward different policies.

58. (A) Both A and R are true and R is the correct explanation of A.
Collectivism is a dominant value in Indian culture, where the welfare of the family and community often takes precedence over individual desires. The traditional social structure emphasizes interdependence, social duty, and group harmony. This orientation means that personal decisions are frequently made with consideration for the impact on the broader social unit, reflecting a deep-seated cultural priority on collective well-being.

59. (D) Adopting the views of a favorite celebrity.
Observational learning occurs when an individual adopts an attitude or behavior simply by watching and imitating a role model. Adopting the views of a favorite celebrity is a classic example of this process, as the person is not necessarily directly rewarded or punished for the view. Instead, the celebrity's influence and status make their attitudes attractive for others to emulate voluntarily.

60. (B) The connotative meaning of objects and concepts.
The semantic differential scale was specifically designed to measure the connotative or emotional meaning that individuals associate with various objects and concepts. By using bipolar adjectives, it captures the subtle nuances of an attitude that purely descriptive scales might overlook. This approach helps researchers understand how people feel about a concept on dimensions like evaluation, potency, and activity.

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61. (A) 2-1-4-3.
The process of attitude change through persuasion begins with the individual paying attention to the message. This is followed by the reception of the message's content. Next, the person must yield to or accept the argument presented. Finally, the change is finalized when the individual retains the message in their memory, allowing the new attitude to influence their future behavior consistently.

62. (D) Allport's classification.
Gordon Allport and his colleagues developed a classification system that categorizes values based on dominant interests. These include Theoretical (discovery of truth), Economic (utility), Aesthetic (form and harmony), Social (love of people), Political (power), and Religious (unity). This framework helps psychologists understand the primary motivations and personality orientations that drive an individual's choices and evaluations in different life domains.

mixed evaluation of an object. This evaluative nature is a core characteristic that differentiates attitudes from purely objective pieces of information or factual knowledge.

28. (A) Both A and R are true and R is the correct explanation of A.
During adolescence, peer groups become a primary source of attitude formation because individuals have a strong psychological need for social acceptance and belonging. To achieve this, adolescents use social comparison to observe the views of their peers and often align their own attitudes with those of the group. This process helps establish a sense of identity within their circle.

29. (C) Behavioral — Predisposition to act.
The behavioral component of an attitude refers to the tendency or predisposition of an individual to act in a certain way toward an object. While the cognitive component involves beliefs and the affective component involves feelings, the behavioral aspect focuses on the actual or intended actions. These three elements together form the ABC model, which explains the structure of human attitudes.

30. (D) Being essentially permanent and resisting any form of modification.
Although attitudes are relatively stable and enduring, they are not permanent and can be modified through new experiences, persuasion, or changes in social context. This flexibility allows individuals to adapt their evaluations and behaviors as they encounter new information or environments. Therefore, claiming that attitudes are entirely resistant to any form of modification is an incorrect description of their nature.

31. (A) Attitude Consistency (ABC Model).
The ABC model of attitudes is illustrated when an individual's cognitions, emotions, and behaviors are in alignment. In this example, the belief that cleanliness is important (cognitive), the feeling of disgust toward littering (affective), and the action of participating in a cleanup (behavioral) are all consistent. This harmony between components creates a strong and stable attitude toward public hygiene.

32. (D) 1, 2, and 3.
Attitudes are formed through various learning processes. Classical conditioning involves associating neutral stimuli with emotional ones, while operant conditioning uses rewards and punishments to reinforce specific evaluations. Observational learning suggests that people adopt attitudes by watching the behaviors and reactions of role models. These mechanisms highlight how the social environment and personal experiences interact to shape psychological dispositions.

33. (B) Knowledge function.
The knowledge function of an attitude helps individuals organize and simplify the vast amount of information they encounter in the world. By providing a structured framework for understanding reality, attitudes allow people to categorize new experiences quickly and efficiently. This cognitive simplification makes the environment more predictable and manageable, reducing the mental effort required to process complex social stimuli.

34. (A) Biological.
The ABC model of attitude consists of three fundamental components: Affective (feelings and emotions), Behavioral (actions and tendencies), and Cognitive (beliefs and thoughts). These elements interact to form a person's overall evaluation of an object. The biological aspect is not part of this specific psychological model, as attitudes are considered learned dispositions rather than purely innate or genetically determined traits.

35. (A) P-2, Q-1, R-3, S-4.
The Likert scale uses summated ratings ranging from strongly agree to disagree, while the Thurstone scale relies on equal-appearing intervals. The Semantic Differential scale employs bipolar adjectives to measure the connotative meaning of concepts. Ranking surveys, like the Rokeach survey, require individuals to order terminal and instrumental values by importance. These tools provide different methods for quantifying subjective states.

36. (D) Ego-defensive function.
The ego-defensive function of an attitude serves to protect an individual's self-esteem and shield them from internal conflicts or harsh realities.

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72. (A) A system of terminal and instrumental values.
This scenario demonstrates the application of terminal and instrumental values. Self-improvement is the terminal value, representing the desired end-state the student wants to achieve. Ambition acts as the instrumental value, which is the preferred mode of conduct or means used to reach that goal. This hierarchy illustrates how broad life objectives are supported by specific behavioral standards and traits.

73. (C) Ignoring individual differences within a group.
A significant negative feature of stereotypes is that they ignore individual differences by applying a generalized set of characteristics to every member of a group. This oversimplification leads to inaccurate judgments, as it fails to recognize the unique personality, talents, and behaviors of each person. Such mental shortcuts can reinforce prejudice and lead to unfair treatment and social exclusion.

74. (A) Leon Festinger.
Leon Festinger is the social psychologist who developed the theory of cognitive dissonance in the 1950s. His work explored how people strive for internal consistency among their beliefs and behaviors. When inconsistencies arise, they experience psychological tension, leading them to adjust their attitudes or actions. This theory remains a cornerstone in understanding human motivation and the process of attitude change.

75. (D) Occurring between people with differing value systems.
Interpersonal value conflict occurs when two or more individuals have different value systems that lead to disagreements or friction in their interactions. Unlike intrapersonal conflict, which is internal, this type happens between people in social, professional, or political settings. Resolving these conflicts often requires communication, negotiation, or compromise to bridge the gap between the varying moral or social standards held.

76. (B) Attitudes and behavior are always perfectly aligned in every situation.
Attitudes and behavior are not always perfectly aligned because external factors such as social norms, situational pressures, and practical constraints can prevent individuals from acting on their beliefs. Research shows that while strong, specific attitudes are better predictors of action, there is often a gap between what people feel and what they actually do in complex real-world environments.

77. (C) Likert — Strongly Agree to Strongly Disagree.
The Likert scale is characterized by its use of a response format where participants indicate their level of agreement or disagreement, typically ranging from strongly agree to strongly disagree. This method allows for the quantification of the intensity of an attitude. Other techniques, such as the Thurstone scale and Semantic Differential, use different structural methods like equal-appearing intervals and bipolar adjectives.

78. (D) C — Conditioning (Learning).
In the ABC model of attitude, the letter 'C' stands for the cognitive component, which includes an individual's beliefs and thoughts about an object. 'A' represents the affective component (feelings), and 'B' represents the behavioral component (actions). Conditioning is a process of learning attitudes but is not one of the three structural components that define what an attitude actually is.

79. (A) Complete rejection of social hierarchy.
Traditional Indian values generally emphasize respect for social hierarchy and elders rather than a complete rejection of it. While modern perspectives may vary, core concepts like dharma often involve fulfilling duties within an established social structure. Other central features of Indian thought include a belief in karma (action and consequence) and an emphasis on collective well-being rather than pure individualism.

80. (B) Values are formed during impressionable childhood years.
The family is considered the primary source of values because the most significant period of socialization occurs during a child's early, impressionable years. During this time, children look to their parents and guardians as role models, internalizing their moral standards and social norms. These foundational beliefs are deeply ingrained and often shape the individual's worldview for life.

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45. (A) P-3, Q-1, R-2, S-4.
A stereotype is a generalized belief about a group, while prejudice is a negative attitude toward that same group. Discrimination refers to the unjustifiable negative behavior or action resulting from these internal states. Finally, an attitude is a general evaluative disposition toward any object. These terms describe the cognitive, affective, and behavioral layers of social bias and personal evaluation.

46. (B) Changing attitudes through communication and messaging.
Persuasion is a primary method for changing attitudes by using deliberate communication and messaging. This process involves a source delivering a message to an audience through a specific channel to influence their beliefs or feelings. Unlike the use of force, persuasion relies on the power of information, logic, or emotional appeal to encourage individuals to voluntarily modify their existing psychological dispositions.

47. (A) Allowing positive expression of central values and self-identity.
The value-expressive function allows individuals to demonstrate their core values and self-identity through their attitudes. By expressing specific views, a person communicates what they stand for and what they believe is important in life. This helps them gain a sense of personal integrity and validation, as their outward attitudes reflect their inner convictions and the image they wish to project.

48. (A) Both A and R are true and R is the correct explanation of A.
Attitudes do not always predict behavior because various external factors and situational constraints can interfere. For example, social pressure or legal requirements might force someone to act against their personal beliefs. Additionally, the strength and specificity of an attitude determine how likely it is to translate into action. When attitudes are weak, the consistency between evaluation and behavior decreases.

49. (B) Semantic differential scale.
The semantic differential scale is an attitude measurement technique that uses pairs of bipolar adjectives, such as good-bad, strong-weak, or active-passive. Respondents rate an object or concept along a continuum between these opposing terms. This method is particularly useful for capturing the connotative meaning and emotional intensity of an individual's attitude, providing insights that numerical agreement scales might miss.

50. (A) It is the emotional reaction to an object.
The cognitive component of an attitude consists of the beliefs, thoughts, and knowledge an individual holds about a specific object. It does not include the emotional reaction, which is actually defined as the affective component. Instead, the cognitive part provides the factual or perceived basis upon which an attitude is built, helping the individual categorize and evaluate information about the object.

51. (C) Being purely innate and present at birth.
Attitudes are defined as learned dispositions that are acquired through social interaction, experience, and environmental influences. They are not innate biological traits that are present at birth. Common features of attitudes include being evaluative, relatively stable over time, and influencing social behavior. This learning process means that attitudes are developed and refined throughout an individual's life rather than being genetically fixed.

52. (A) 1 and 2 only.
Social comparison is a key source of attitude formation where individuals look to others to validate their own beliefs and determine if their attitudes are socially "correct." This process is not limited to interactions between different generations; it occurs among peers and within various social groups of all ages. By comparing themselves to others, people reduce uncertainty and achieve social alignment.

53. (C) Cognitive dissonance.
Cognitive dissonance occurs when a person's behavior, like buying an expensive car, conflicts with a cognition, such as the knowledge that they cannot afford it. To reduce the resulting discomfort, the individual might seek out positive reviews to justify the purchase. This mental process helps resolve the inconsistency between their financial reality and their choice, thereby restoring a sense of internal harmony.

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dispositions that influence social behavior rather than biological homeostasis.

90. (A) An individual holds two contradictory cognitions.
Cognitive dissonance is most likely to occur when an individual holds two cognitions that are psychologically inconsistent or contradictory. This state of imbalance creates an uncomfortable internal tension that motivates the person to resolve the conflict. Harmony between beliefs and actions or having no opinion would not produce dissonance, as these states do not involve the necessary clash of mental elements.

91. (D) Persuasion.
Persuasion is the process of changing an individual's attitude through the use of communication, logical arguments, and data. In this example, the spokesperson is attempting to influence the audience's negative evaluation by providing new information that appeals to their intellect. This method aims for a voluntary shift in belief and attitude rather than using force, coercion, or simple behavioral conditioning.

92. (D) Both statements are incorrect.
Both statements are incorrect because they reverse the roles of the two concepts. Prejudice is actually the affective or emotional component of an antagonistic attitude, involving negative feelings toward a group. A stereotype is the cognitive component, representing the beliefs and overgeneralized thoughts held about that group. Together with discrimination (behavior), they form the full structure of biased social attitudes.

93. (C) Decide based on group harmony and social duty.
In a collectivist culture, individuals are likely to make decisions based on group harmony, social duty, and the welfare of the family or community. This contrasts with individualist cultures where personal autonomy and self-interest are prioritized. The emphasis on social interdependence means that personal goals are often subordinate to the needs and expectations of the broader social groups to which one belongs.

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94. (D) Righteousness and moral duty.
Dharma is a multifaceted concept in Indian values that primarily refers to righteousness, moral duty, and the ethical conduct expected of an individual. It involves living in accordance with social and cosmic laws to maintain order and harmony. Rather than focusing on wealth or pleasure, Dharma provides a spiritual and ethical framework for how one should act throughout their life.

95. (A) Looking to others to validate one's own opinions and beliefs.
Social comparison involves looking to other people, especially peers and role models, to determine the validity or "correctness" of one's own attitudes. When individuals are uncertain about their evaluations, they observe the views of their social group to achieve alignment. This process is a major driver of attitude formation as it helps people feel socially connected and mentally secure.

96. (B) It is a type of 'equal-appearing interval' scale.
The Likert scale is not an 'equal-appearing interval' scale; that description applies specifically to the Thurstone scale. The Likert scale is a method of summated ratings that typically uses a 5-point or 7-point format to measure the intensity of an individual's agreement or disagreement with various statements. This makes it easier to construct and administer compared to the Thurstone method.

97. (B) Positive attitude — Approach behavior.
Attitudes typically guide behavior in predictable ways. A positive attitude toward an object or person generally leads to approach behavior, where the individual seeks out or supports that object. Conversely, a negative attitude usually results in avoidance behavior. Neutral attitudes are characterized by a lack of strong emotional reaction or specific behavioral tendency, representing a state of indifference toward the stimulus.

98. (A) Terminal — Obedient.
Terminal values represent end-states of existence, while instrumental values represent modes of conduct. 'Obedient' is an instrumental value because it describes a way of behaving rather than a final life goal. Other pairs are correct: 'a

(D) Modernization

30. Match List I with List II and select the correct answer using the codes given below:
List I: (Concept)
P. Cultural Lag
Q. Social Disorganization
R. Social Change
S. Resistance to Change
List II: (Description)
1. Breakdown of social institutions
2. Imbalance between technology and morals
3. Alteration in social structure
4. Vested interests opposing new ways
(A) P-2, Q-1, R-3, S-4
(B) P-1, Q-2, R-4, S-3
(C) P-4, Q-3, R-2, S-1
(D) P-3, Q-4, R-1, S-2

31. Social disorganization occurs when:
(A) All members of society agree on all cultural values.
(B) New laws are perfectly integrated into the old system.
(C) A sudden increase in the population's national literacy rate.
(D) Failure of rules to inhibit impulsive behavior.

32. Why do people often show "resistance to change"?
(A) Economic prosperity for all members of the population.
(B) Fear of the unknown and attachment to tradition.
(C) Biological instinct to prefer complex modern machines.
(D) Change occurring faster than individuals can learn new skills.

33. Which of the following is a "technological factor" of social change?
(A) The sudden rise of a new local religious sect.
(B) The internet's impact on global communication.
(C) A significant change in the legal age of marriage.
(D) The discovery of a new ancient philosophical text.

34. Economic factors lead to social change primarily through:
(A) Changes in the modes of production and distribution.
(B) Changes in the specific language spoken in a village.
(C) Changes in the musical preferences of a social group.
(D) The persistent stability of traditional religious rituals.

35. Read the following assertion and reason and select the correct option:
Assertion (A): Rapid industrialization often leads to social disorganization.
Reason (R): The existing social institutions may fail to adapt quickly to the new economic realities.
(A) Both A and R are true and R is the correct explanation of A.
(B) Both A and R are true but R is not the correct explanation of A.
(C) A is true but R is false.
(D) A is false but R is true.

36. Read the following statements and select the correct option:
Statement I: Demographic factors like birth rates can trigger social change.
Statement II: Demographic factors have no impact on the labor market or family structure.
(A) Statement I is correct, but Statement II is incorrect.
(B) Statement II is correct, but Statement I is incorrect.
(C) Both statements are correct.
(D) Neither statement is correct.

37. Which of the following is an example of a "cultural factor" of social change?
(A) An earthquake destroying a large metropolitan city.
(B) A sudden decrease in the national annual birth rate.
(C) Spread of Western values in traditional societies.
(D) The implementation of a new progressive tax law.

38. Political factors drive social change through:
(A) Changes in the genetic makeup of all

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CHAPTER 23
Social Control and Social Change

1. Which of the following best defines social control?
(A) A total breakdown of law and order in a given territory.
(B) The way society ensures its members behave in predictable ways.
(C) The individual's personal and psychological desire to change their environment.
(D) The persistent economic dominance of one social class over another.

2. Read the following statements and select the correct option:
Statement I: Social control is only necessary in modern industrial societies.
Statement II: Social control helps in maintaining the equilibrium of the social system.
(A) Statement I is correct, but Statement II is incorrect.
(B) Statement II is correct, but Statement I is incorrect.
(C) Both statements are correct.
(D) Neither statement is correct.

3. Which of the following is a correctly matched pair?
(A) Formal Social Control — Public Opinion
(B) Informal Social Control — State Legislation
(C) Formal Social Control — Prison System
(D) Informal Social Control — Police Department

4. What is the primary purpose of social control regarding social order?
(A) To encourage radical and violent revolutions among the local youth.
(B) To promote individualistic deviance over established collective goals.
(C) To eliminate the fundamental need for traditional family structures.
(D) To ensure stability and predictability within the social community.

5. In the context of ensuring conformity, social control aims to:
(A) Make every individual have identical personality traits.
(B) Force individuals to live in isolation.
(C) Align behavior with established social expectations.
(D) Discourage formal education.

6. Which of the following is NOT a purpose of social control?
(A) Protecting shared cultural values and community norms.
(B) Facilitating systemic and widespread social disorganization.
(C) Reducing social conflict through regulatory mechanisms.
(D) Promoting social solidarity and group cohesion.

7. When a person violates a norm, it is sociologically referred to as:
(A) Conformity
(B) Internalization
(C) Assimilation
(D) Deviance

8. Identify the INCORRECT statement regarding deviance:
(A) Deviance is harmful to society in every context.
(B) Deviance is a cause for the application of social control.
(C) Deviance refers to the non-conformity to social norms.
(D) What is considered deviant varies across different cultures.

9. An individual obeys traffic lights to avoid a fine. This is an example of:
(A) Internalized control
(B) Informal control
(C) Formal control
(D) Cultural lag

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49. An individual refrains from stealing because they fear the shame from their neighbors. This is:
(A) Formal social control
(B) Informal social control
(C) Political social control
(D) Legal social control

50. Match List I with List II and select the correct answer using the codes given below:
List I: (Thinker)
P. Herbert Spencer
Q. Karl Marx
R. Arnold Toynbee
S. Talcott Parsons
List II: (Focus)
1. Class Struggle
2. Social Organism/Evolution
3. Equilibrium Model
4. Challenge and Response
(A) P-2, Q-1, R-4, S-3
(B) P-1, Q-2, R-3, S-4
(C) P-4, Q-3, R-2, S-1
(D) P-3, Q-4, R-1, S-2

51. "Folkways" and "Mores" are components of:
(A) Formal social control
(B) External social control only
(C) Informal social control
(D) Legislative social control

52. Read the following statements and select the correct option:
Statement I: Social change is a collective phenomenon.
Statement II: Individual habits do not constitute social change unless they affect social structure.
(A) Statement I is correct, but Statement II is incorrect.
(B) Statement II is correct, but Statement I is incorrect.
(C) Both statements are correct.
(D) Neither statement is correct.

53. Which of the following is a negative sanction?
(A) Public praise
(B) A salary hike
(C) A prison sentence
(D) A letter of appreciation

54. The transition from a joint family system to a nuclear family system due to industrialization is an example of:
(A) Cultural lag
(B) Social change
(C) Social control
(D) Internalization

55. Read the following assertion and reason and select the correct option:
Assertion (A): Technology is a major driver of social change.
Reason (R): Technological innovations change the way people interact and perform their work.
(A) Both A and R are true and R is the correct explanation of A.
(B) Both A and R are true but R is not the correct explanation of A.
(C) A is true but R is false.
(D) A is false but R is true.

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56. Which of the following is NOT an agency of formal social control?
(A) Family
(B) Law
(C) Police
(D) Prison

57. When norms are so deeply embedded in an individual that they follow them automatically, it is called:
(A) Externalization
(B) Social disorganization
(C) Internalization
(D) Resistance to change

58. Identify the INCORRECT pair regarding causes of social change:
(A) Cultural — Discovery of iron
(B) Economic — Industrial revolution
(C) Demographic — Migration
(D) Political — Election results

59. Which concept refers to the tension that arises when the non-material culture (beliefs/values) lags behind material culture (technology)?
(A) Social conflict
(B) Social evolution
(C) Modernization
(D) Cultural lag

(C) Providing a moral framework and divine sanctions.
(D) Promoting secular state laws over religious codes.

20. Identify which of the following statements regarding the role of "Media" in social control are correct:
1. It helps in the construction of public opinion.
2. It highlights deviant acts to reinforce social boundaries.
3. It has no influence on the values of the youth.

Which of the above statement(s) is/are correct?
(A) 1 and 2 only
(B) 2 and 3 only
(C) 1 and 3 only
(D) 1, 2, and 3

21. Positive means of social control are also known as:
(A) Punishments
(B) Sanctions of guilt
(C) Rewards
(D) Legal threats

22. Which of the following is an example of a negative means of social control?
(A) A promotion at work for consistent good performance.
(B) Social ostracism for violating a cultural taboo.
(C) A medal awarded for acts of extraordinary bravery.
(D) Praise from a teacher for maintaining high grades.

23. Which of the following is the best example of "Internalization" as a control mechanism?
(A) Obeying rules only when a police officer is present.
(B) Paying taxes solely to avoid a lengthy jail sentence.
(C) Changing one's clothes because of a formal dress policy.
(D) Following a moral principle due to internal belief.

24. Socialization is related to social control because:
(A) Learning the norms that individuals are expected to follow.
(B) Replacing social norms with biological instincts.
(C) Encouraging individuals to disregard all social rules.
(D) Maintaining a biological process unrelated to society.

25. Identify the correct chronological sequence of the following steps of social control through socialization:
1. Internalization of norms by the individual.
2. Exposure to social expectations through primary groups.
3. Conformity to social standards as a part of personality.

(A) 1-2-3
(B) 2-1-3
(C) 3-1-2
(D) 2-3-1

26. Social change is best defined as:
(A) Alterations in social structures and cultural patterns.
(B) Changes in the physical geography of a region.
(C) The daily change in local atmospheric weather patterns.
(D) A person moving from one residential house to another.

27. Which characteristic of social change implies that it occurs everywhere, regardless of the type of society?
(A) Continuous nature
(B) Predictability
(C) Temporal nature
(D) Universality

28. Which of the following is an INCORRECT pair regarding the nature of social change?
(A) Universal — Occurs in all societies
(B) Planned — Always occurs by accident
(C) Continuous — It never stops
(D) Multi-causal — Caused by many factors

29. The concept where material culture changes faster than non-material culture is known as:
(A) Social disorganization
(B) Social evolution
(C) Cultural lag

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10. Match List I with List II and select the correct answer using the codes given below:
List I: (Agencies)
P. Family
Q. Law
R. Religion
S. Courts
List II: (Type)
1. Formal Agency
2. Informal Agency
3. Informal Agency
4. Formal Agency
(A) P-2, Q-1, R-3, S-4
(B) P-1, Q-2, R-4, S-3
(C) P-3, Q-4, R-1, S-2
(D) P-2, Q-4, R-3, S-1

11. Which formal agency of social control is primarily responsible for the immediate enforcement of laws and maintenance of public order?
(A) The Judiciary
(B) The Media
(C) The Peer Group
(D) The Police

12. Which of the following is an INCORRECT pair?
(A) Law — Codified norms
(B) Prison — Informal social control
(C) Religion — Spiritual sanctions
(D) Family — Primary socialization

13. The "Judiciary" acts as a formal agency of social control by:
(A) Creating traditional folkways for the rural village.
(B) Organizing large-scale neighborhood cultural festivals.
(C) Interpreting laws and adjudicating legal disputes.
(D) Managing standard primary school academic curricula.

14. How does a prison serve as an agency of social control?
(A) Encouraging deviant behavior through social rewards.
(B) Actively encouraging the violation of various state norms.
(C) Serving as a primary group for early childhood socialization.
(D) Isolating law-breakers and acting as a deterrent.

15. Read the following assertion and reason and select the correct option:
Assertion (A): Family is considered the most effective informal agency of social control.
Reason (R): It shapes the individual's personality and internalizes values during early childhood.
(A) Both A and R are true and R is the correct explanation of A.
(B) Both A and R are true but R is not the correct explanation of A.
(C) A is true but R is false.
(D) A is false but R is true.

16. Read the following statements and select the correct option:
Statement I: Informal social control is usually unwritten and based on customs.
Statement II: Formal social control is enforced through organized, official bodies.
(A) Statement I is correct, but Statement II is incorrect.
(B) Statement II is correct, but Statement I is incorrect.
(C) Both statements are correct.
(D) Neither statement is correct.

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17. Peer groups exercise social control primarily through:
(A) Criminal prosecution and the imposition of heavy fines.
(B) Approval, ridicule, or threat of social exclusion.
(C) Mandatory imprisonment and forced physical labor.
(D) Passing various constitutional amendments and laws.

18. Which of the following is NOT an informal agency of social control?
(A) Police
(B) Public opinion
(C) Customs
(D) Morality

19. Religion acts as a means of social control by:
(A) Mandating the use of specific high-technology tools.
(B) Focusing exclusively on economic profit.

citizens.
(B) Legislation, revolutions, and shifts in power.
(C) The movement of underground tectonic plates.
(D) The natural aging process of the population.

39. Who among the following is associated with the "Evolutionary Theory" of social change?
(A) Karl Marx
(B) Oswald Spengler
(C) Arnold Toynbee
(D) Herbert Spencer

40. Identify which of the following statements about Spencer's Evolutionary Theory are correct:
1. Society moves from simple to complex forms.
2. Social evolution is similar to biological evolution.
3. Society inevitably moves toward a state of chaos.

(A) 1 and 2 only
(B) 2 and 3 only
(C) 1 and 3 only
(D) 1, 2, and 3

41. Cyclical theory of social change suggests that:
(A) Society moves in a straight line toward progress.
(B) Social change is purely random and has no pattern.
(C) Stages of rise, peak, and decline like a life cycle.
(D) Change only occurs during technological revolutions.

42. Oswald Spengler's work "The Decline of the West" is an example of:
(A) Cyclical Theory
(B) Conflict Theory
(C) Evolutionary Theory
(D) Functionalist Theory

43. Arnold Toynbee's theory of "Challenge and Response" belongs to which school of thought?
(A) Evolutionary
(B) Conflict
(C) Modernization
(D) Cyclical Theory

44. According to Karl Marx, the primary cause of social change is:
(A) Widespread religious transformation and reform.
(B) Class conflict over the means of production.
(C) Harmonious cooperation between different classes.
(D) Cultural diffusion from various other countries.

45. Which of the following is a correctly matched pair?
(A) Spencer — Cyclical Theory
(B) Toynbee — Evolutionary Theory
(C) Marx — Conflict Theory
(D) Spengler — Functionalist Theory

46. The Functionalist theory of social change emphasizes the:
(A) The absolute necessity of violent political revolutions.
(B) Constant state of war between the rich and the poor.
(C) Total rejection of all established social institutions.
(D) Equilibrium model used to maintain system balance.

47. Modernization theory posits that:
(A) Societies move toward modern industrial forms.
(B) Societies maintain traditional forms to prevent change.
(C) Technology is the least significant factor of change.
(D) Religion is the final stage of all social development.

48. Which factor is NOT typically associated with Modernization?
(A) Rapid urbanization of formerly rural populations.
(B) Rejection of scientific and rational reasoning.
(C) Increased literacy rates among the general public.
(D) Widespread adoption of new industrial technology.

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List II: (Key Proponent)
1. Karl Marx
2. Herbert Spencer
3. Talcott Parsons
4. Oswald Spengler

(A) P-2, Q-4, R-1, S-3
(B) P-1, Q-2, R-3, S-4
(C) P-2, Q-1, R-4, S-3
(D) P-4, Q-3, R-2, S-1

71. Peer groups exercise social control through "informal sanctions" such as:
(A) Passing a local ordinance.
(B) Issuing a formal warrant.
(C) Sentencing a member to jail.
(D) Using sarcasm or praise.

72. Read the following statements and select the correct option:
Statement I: Social change is only caused by external factors like invasion.
Statement II: Social change can be caused by internal factors like new inventions or ideas.
(A) Statement I is correct, but Statement II is incorrect.
(B) Statement II is correct, but Statement I is incorrect.
(C) Both statements are correct.
(D) Neither statement is correct.

73. Which of the following is a correctly matched pair?
(A) Formal Agencies — Gossip and Sarcasm
(B) Negative Means — Medals and Trophies
(C) Informal Agencies — Rituals and Customs
(D) Positive Means — Fines and Penalties

74. The concept of "Internalization" implies that:
(A) Norms become part of the individual's own conscience.
(B) Norms are forced upon the individual against their will every day.
(C) Individuals follow norms mostly when being watched by authorities.
(D) The government directs most thoughts of the citizen.

75. Read the following assertion and reason and select the correct option:
Assertion (A): Modernization is often equated with Westernization.
Reason (R): Historically, the processes of industrialization and secularization began in Western nations.
(A) Both A and R are true and R is the correct explanation of A.
(B) Both A and R are true but R is not the correct explanation of A.
(C) A is true but R is false.
(D) A is false but R is true.

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76. Which of the following is NOT a problem of social change?
(A) Resistance from groups with vested interests.
(B) Increased social solidarity and group harmony.
(C) Cultural lag between technology and values.
(D) Temporary and localized social disorganization.

77. How does the "Media" serve as an agency of social control?
(A) Directly arresting criminals in public spaces.
(B) Passing various laws in the national parliament.
(C) Setting agendas and labeling deviant behaviors.
(D) Performing traditional religious marriage ceremonies.

78. Which of the following is an INCORRECT pair?
(A) Spengler — Decline of Civilizations
(B) Spencer — Simple to Complex Society
(C) Ogburn — Cultural Lag
(D) Marx — Stability and Harmony

79. In the context of social change, what does "universality" mean?
(A) Change is a global phenomenon in every society.
(B) Change happens only in densely populated urban areas.
(C) Change only happens in the physical, non-social world.
(D) All societies change at exactly the same speed.

80. Identify which of the following statements about "Conflict Theory" are correct:
1. Social change is the result of struggles between dominant and subordinate groups.

60. Identify which of the following statements about "Internalization" are correct:
1. It is the result of successful socialization.
2. It requires constant external supervision.
3. It makes social control more efficient.

(A) 1 and 2 only
(B) 2 and 3 only
(C) 1 and 3 only
(D) 1, 2, and 3

61. What characterizes "formal social control"?
(A) Spontaneous and emotional reactions of a crowd.
(B) Control mechanisms found only in primitive tribes.
(C) Deliberate, codified, and organized control.
(D) Control depending mostly on local family gossip.

62. Which of the following is an example of a "demographic factor" causing social change?
(A) Adoption of a new national political constitution.
(B) The sudden rise of a new experimental musical genre.
(C) The historical development of large steam engines.
(D) Increase in the proportion of elderly people.

63. Which theory of social change is most likely to use the phrase "Survival of the Fittest" in a social context?
(A) Evolutionary Theory
(B) Conflict Theory
(C) Functionalist Theory
(D) Cyclical Theory

64. Which of the following is the best example of a "positive sanction"?
(A) Being ignored by friends for an extended period.
(B) Receiving a scholarship for academic excellence.
(C) Being fined for littering in a public park area.
(D) Receiving a formal warning from the local police.

65. Identify the correct sequence in which the following appear in Toynbee's theory of social change:
1. Growth
2. Challenge
3. Breakdown
4. Response

(A) 1-2-3-4
(B) 2-4-1-3
(C) 4-2-1-3
(D) 2-1-4-3

66. In a functionalist equilibrium model, what happens after a disturbance causes social change?
(A) Society works to restore a state of stability.
(B) Society remains in a permanent state of total chaos.
(C) Society immediately dissolves into separate units.
(D) All social norms are redefined by the state.

67. Which of the following is a primary cause of "social disorganization"?
(A) Perfect alignment between culture and technology.
(B) Excessive conformity to all existing social norms.
(C) Rapid and uneven patterns of social change.
(D) A lack of modern technology.

68. Which of the following is an INCORRECT statement?
(A) Social control can be both positive and negative.
(B) Law is a secondary means of social control.
(C) Socialization is a continuous and lifelong process.
(D) Change is always beneficial for all sections.

69. Which agency is responsible for the "adjudication" aspect of social control?
(A) Family
(B) Media
(C) Courts
(D) Peer groups

70. Match List I with List II and select the correct answer using the codes given below:
List I: (Theory)
P. Evolutionary
Q. Cyclical
R. Conflict
S. Functionalist (Equilibrium)

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comfortable life' is a terminal value, and 'broad-minded' and 'imaginative' are instrumental values as they are traits used to achieve various objectives in life.

99. (C) Belief that a policy is efficient.
The affective component of an attitude involves emotions and feelings, such as joy, anger, or dislike. A belief that a policy is efficient is a cognitive component because it represents an intellectual evaluation, knowledge, or thought about the object's characteristics. Distinguishing between feelings (affect) and thoughts (cognition) is essential for understanding how attitudes are structured and how they influence social interaction.

100. (D) The three components of an attitude.
The ABC model is a standard framework in social psychology used to describe the three components of an attitude: Affective, Behavioral, and Cognitive. This model explains how our evaluations of objects are built from a combination of our feelings, our tendencies to act, and our beliefs. Understanding these components helps researchers analyze how attitudes are formed, maintained, and potentially changed over time.

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2. Change is always slow, gradual, and peaceful.
3. Economic disparity is a central cause of social tension.

(A) 1 and 2 only
(B) 2 and 3 only
(C) 1 and 3 only
(D) 1, 2, and 3

81. Which means of social control involves the use of "Rewards"?
(A) Negative means
(B) Positive means
(C) Formal legislation only
(D) Coercive means

82. Deviance is a cause of social control because:
(A) Deviance threatens social stability and order.
(B) Society needs to encourage more frequent deviance.
(C) Deviance is exactly the same as socialization.
(D) Without deviance, laws would no longer exist.

83. Which of the following is the best definition of "Modernization"?
(A) The process of returning to ancient religious traditions.
(B) The total rejection of any form of social change.
(C) Transition from traditional to industrial forms.
(D) Increasing dependency on traditional agrarian practices.

84. Identify the "Informal" means of social control among the following:
(A) The Indian Penal Code
(B) University Regulations
(C) Traffic Rules
(D) Religious Taboos

85. Read the following assertion and reason and select the correct option:
Assertion (A): Social control is essential for the survival of society.
Reason (R): Without social control, there would be chaos and no collective life would be possible.
(A) Both A and R are true and R is the correct explanation of A.
(B) Both A and R are true but R is not the correct explanation of A.
(C) A is true but R is false.
(D) A is false but R is true.

86. Which of the following is a "political factor" of social change?
(A) The scientific discovery of a new medical vaccine.
(B) Passage of the Right to Education legislation.
(C) A significant change in the global fashion industry.
(D) A minor fluctuation in the national stock market.

87. Which theory views social change as a process of "social differentiation" and increasing complexity?
(A) Conflict Theory
(B) Cyclical Theory
(C) Demographic Theory
(D) Evolutionary Theory

88. Which of the following is an INCORRECT pair?
(A) Law — Informal Agency
(B) Family — Informal Agency
(C) Police — Formal Agency
(D) Religion — Informal Agency

89. "Social disorganization" is often a result of:
(A) The presence of too much formal social control.
(B) A very high degree of universal social consensus.
(C) Rapid change outpacing institutional adaptation.
(D) A lack of modern technology.

90. Match List I with List II and select the correct answer using the codes given below:
List I: (Social Factor)
P. Technological Factor
Q. Demographic Factor
R. Cultural Factor
S. Economic Factor
List II: (Example)
1. Globalization of Western music
2. Rise of the middle class
3. Automation in factories
4. Decline in infant mortality rates
(A) P-3, Q-4, R-1, S-2

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fail to respond effectively to new challenges, they enter a period of breakdown and disintegration. This focus on the rise and fall of civilizations emphasizes the non-linear history.

44. (B) Class conflict over the means of production.
Karl Marx identified class conflict as the primary engine of social change. He argued that the struggle between those who own the means of production and those who provide labor drives historical progress. When the tensions between these classes become unsustainable, a revolution occurs, leading to a new social structure. For Marx, material conditions and economic disputes are the ultimate causes.

45. (C) Marx — Conflict Theory
Karl Marx is the primary proponent of conflict theory, which views social change as the result of struggles between competing groups for resources and power. This is a correctly matched pair. In contrast, Spencer is linked to evolutionary theory, not cyclical, while Toynbee is associated with cyclical theory. Spengler is also a cyclical theorist, not a functionalist, making those pairings inaccurate.

46. (D) Equilibrium model used to maintain system balance.
The functionalist theory of social change focuses on how societies maintain stability through an equilibrium model. According to this view, society is a system of interrelated parts that work together to maintain balance. When a disturbance occurs in one part, other parts adjust to restore order. Change is seen as a gradual process of adaptation that ensures the continued functioning.

47. (A) Societies move toward modern industrial forms.
Modernization theory suggests that all societies undergo a transition from traditional, agrarian lifestyles to modern, industrial, and urbanized forms. This process involves the adoption of scientific reasoning, advanced technology, and democratic political structures. The theory posits that as societies develop, they increasingly resemble the industrialized nations of the West, characterized by high literacy, economic growth, and modern cultural values.

48. (B) Rejection of scientific and rational reasoning.
Modernization is characterized by the widespread adoption of scientific and rational reasoning rather than its rejection. Key features include urbanization, increased literacy, and the use of industrial technology. Societies undergoing modernization move away from traditional beliefs and move toward secularism and efficiency. Therefore, a rejection of rationality would be a move toward traditionalism, which is the opposite of modernization.

49. (B) Informal social control
Refraining from an action due to the fear of social shame or neighborly judgment is a classic example of informal social control. This type of regulation occurs through spontaneous interpersonal reactions rather than official legal processes. Shame, gossip, and social pressure are powerful tools used by primary groups to enforce conformity to community norms without the intervention of formal state legal institutions.

50. (A) P-2, Q-1, R-4, S-3
Different sociological thinkers emphasize various drivers of social change. Herbert Spencer compared society to a biological organism undergoing evolution. Karl Marx focused on class struggle as the engine of history. Arnold Toynbee developed the challenge and response theory to explain the rise and fall of civilizations. Talcott Parsons utilized the equilibrium model to describe how social systems maintain their stability.

51. (C) Informal social control
Folkways and mores are essential components of informal social control. Folkways represent the routine conventions of everyday life, such as etiquette, while mores are norms that carry significant moral importance. Neither is codified into formal law by the state; instead, they are enforced through social approval or disapproval within the community, guiding behavior through internalized traditions and the reactions of others.

52. (C) Both statements are correct.
Social change is inherently a collective phenomenon, as it involves shifts in the shared structures and culture of an entire community. Individual habits or personal life changes

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ANSWERS

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1. (B) The way society ensures its members behave in predictable ways.
Social control represents the various mechanisms, strategies, and institutions through which a society maintains order and stability. It regulates individual and group behavior to ensure conformity to established norms and values. By creating a framework of expectations, social control prevents chaos and allows for a predictable social environment where collective life can function effectively and safely for everyone.

2. (B) Statement II is correct, but Statement I is incorrect.
Social control is a universal necessity found in every human society, whether primitive or modern, as no group can survive without order. It serves as a vital mechanism for maintaining the social system's equilibrium by balancing individual desires with collective needs. While modern societies use formal laws, simple societies rely heavily on informal traditions to achieve this essential stability.

3. (C) Formal Social Control — Prison System
Formal social control is exercised through organized, codified, and official institutions that have the legal authority to enforce regulations. The prison system serves as a primary example of such an agency, utilizing physical confinement and legal sanctions to manage deviance. In contrast, informal controls rely on spontaneous reactions like gossip or public opinion, which lack official legal status and authority.

4. (D) To ensure stability and predictability within the social community.
The fundamental goal of social control is the maintenance of social order by minimizing deviant behavior and promoting conformity. By establishing clear guidelines for conduct, it ensures that interactions between community members remain stable and predictable over time. This regulatory framework prevents social fragmentation and facilitates the harmonious functioning of the entire social structure, allowing individuals to cooperate with mutual understanding.

5. (C) Align behavior with established social expectations.
Conformity is achieved when individuals adapt their actions to meet the prevailing standards and norms of their society. Social control mechanisms work to encourage this alignment, ensuring that people fulfill their roles according to community expectations. This process reduces uncertainty in social interactions and strengthens the cohesion of the group by standardizing acceptable behavior through various rewards and negative sanctions.

6. (B) Facilitating systemic and widespread social disorganization.
Social control is designed to prevent social disorganization rather than facilitate it. Its primary purposes include protecting shared cultural values, reducing internal conflicts, and promoting solidarity among members. By applying sanctions and rewards, it discourages actions that would lead to systemic breakdown or chaos, thereby ensuring that the social structure remains intact and functional through established regulatory and corrective social mechanisms.

7. (D) Deviance
Deviance refers to any behavior, belief, or condition that violates significant social norms in the society or group in which it occurs. It is the opposite of conformity and often triggers the application of social control mechanisms. Sociologically, what is considered deviant depends on the specific cultural context and the social definitions of normality within a particular community or group.

8. (A) Deviance is harmful to society in every context.
While deviance involves non-conformity to norms, it is not always harmful. Sociologists like Durkheim argued that deviance can clarify social boundaries and promote necessary social change by highlighting injustices. It is a relative concept that varies across cultures and time. Therefore,

labeling all deviant acts as universally damaging ignores their potential role in social evolution and the definition of morality.

9. (C) Formal control
Formal control involves the use of codified laws and official sanctions enforced by state-authorized agencies. Obeying traffic signals to avoid a monetary fine is a direct response to a legal regulation. This type of control is deliberate and organized, ensuring that individuals follow specific rules through the threat of standardized punishments administered by the government rather than through informal peer pressure.

10. (A) P-2, Q-1, R-3, S-4
Agencies of social control are categorized into formal and informal types based on their organizational structure. The family and religion are informal agencies because they rely on personal relationships and moral codes to influence behavior. Conversely, law and courts are formal agencies, as they utilize written statutes and official legal procedures to regulate the conduct of citizens through organized state authority.

11. (D) The Police
The police serve as a primary formal agency of social control responsible for the direct enforcement of laws. Their role involves patrolling communities, preventing criminal activity, and apprehending those who violate legal statutes. By maintaining public order and safety, they act as the immediate visible arm of the state's authority in regulating behavior and deterring potential deviance through official power.

12. (B) Prison — Informal social control
A prison is a formal agency of social control because it is an organized, state-run institution that uses codified legal sanctions. It does not belong to the category of informal control, which consists of unwritten norms like customs or public opinion. Identifying the prison as informal is incorrect, as it operates through explicit laws and official bureaucratic procedures rather than spontaneous interactions.

13. (C) Interpreting laws and adjudicating legal disputes.
The judiciary functions as a formal agency of social control by providing a legal framework for conflict resolution. Its primary responsibility is the interpretation of legislative statutes and the adjudication of disputes between parties. Through court rulings and legal precedents, the judiciary reinforces social order by ensuring that laws are applied consistently and that justice is formally administered by the state.

14. (D) Isolating law-breakers and acting as a deterrent.
Prisons function as agencies of social control by removing individuals who violate significant laws from the general population. This isolation serves both as a punishment for the offender and a deterrent to others in society. By imposing physical restrictions on liberty, the state demonstrates the consequences of deviance, thereby discouraging potential law-breaking and upholding the established legal order and security.

15. (A) Both A and R are true and R is the correct explanation of A.
The family is widely recognized as the most fundamental informal agency because it provides primary socialization. During early childhood, individuals internalize the values, norms, and moral standards of their culture within the domestic setting. This internal psychological conditioning is highly effective because it shapes the core personality, making social control a self-regulating process for most individuals throughout their entire lives.

16. (C) Both statements are correct.
Informal social control operates through unwritten rules, customs, and traditions that guide behavior in everyday social life. In contrast, formal social control is exercised through organized, official bodies such as the police and the judiciary, which enforce written laws. Both forms are essential for maintaining social order, as they address different aspects of human conduct across various diverse social settings.

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17. (B) Approval, ridicule, or threat of social exclusion.
Peer groups function as informal agencies of social control by exerting pressure through interpersonal dynamics. Members often conform to group norms to gain approval or avoid the sting of ridicule and sarcasm. The threat of being ostracized or excluded from the group serves as a powerful psychological mechanism that ensures individuals align their behavior with the shared expectations of their social equals.

18. (A) Police
The police are an organized, official body of the state, making them a formal agency of social control. Their authority is derived from written laws and government statutes. In contrast, public opinion, customs, and morality are informal mechanisms because they lack a codified legal structure and operate through spontaneous social reactions and internalized beliefs rather than through the official state bureaucracy.

19. (C) Providing a moral framework and divine sanctions.
Religion influences behavior by establishing a moral framework based on spiritual beliefs and values. It utilizes divine sanctions, such as the concepts of sin, salvation, or karma, to encourage adherence to its teachings. By defining what is sacred and what is profane, religion provides individuals with an internal compass that guides their actions according to perceived higher spiritual laws and community values.

20. (A) 1 and 2 only
The media plays a significant role in social control by shaping public opinion and highlighting deviant acts. By reporting on crime and social violations, it reinforces the boundaries of acceptable behavior and creates a collective awareness of norms. The idea that media has no influence on youth is incorrect, as it is a powerful agent of modern socialization and values.

21. (C) Rewards
Positive means of social control involve the use of rewards to encourage and reinforce desirable behavior. These incentives can include praise, promotions, medals, or financial bonuses. By providing a tangible or intangible benefit for conformity, society motivates individuals to adhere to norms willingly. This proactive approach contrasts with negative control, which focuses on discouraging deviance through the application of punishments.

22. (B) Social ostracism for violating a cultural taboo.
Negative means of social control are punishments used to discourage behavior that violates social norms. Social ostracism is a powerful informal sanction where an individual is excluded from a group due to their actions. Unlike positive rewards like promotions, this mechanism uses social pain and exclusion to pressure the individual into conforming to the community's established cultural values and social expectations.

23. (D) Following a moral principle due to internal belief.
Internalization occurs when social norms and values become an integral part of an individual's conscience. When a person follows a rule because they believe it is fundamentally right, they are exercising self-control. This process makes external supervision unnecessary, as the individual's own sense of morality ensures conformity. It represents the most effective form of social control because it is self-driven.

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24. (A) Learning the norms that individuals are expected to follow.
Socialization is the lifelong process through which individuals learn the culture and expectations of their society. It is intrinsically linked to social control because it teaches the norms that ensure predictable behavior. By educating people on how to act in various social roles, socialization provides the foundation for conformity, turning external social rules into internalized personal habits and ethical beliefs.

25. (B) 2-1-3
The process of social control through socialization begins when an individual is first exposed to social expectations within primary groups like the family. Following this exposure, the individual internalizes these norms, making them a part of their own belief system. Finally, this leads to consistent conformity to social standards, which then becomes a permanent feature of the individual's integrated social personality.

ensuring that specific consequences follow certain actions. Unlike the spontaneous nature of informal control, formal mechanisms are bureaucratic and part of the official legal structure.

62. (D) Increase in the proportion of elderly people.
Demographic factors causing social change relate to shifts in the size, structure, and distribution of a population. An increase in the elderly population is a demographic shift that forces societies to adapt their healthcare systems and labor markets. This change in age composition differs from technological or political factors because it stems directly from biological trends in birth and death rates.

63. (A) Evolutionary Theory
The phrase "Survival of the Fittest" is central to the evolutionary theory of social change, particularly as articulated by Herbert Spencer. This perspective suggests that societies, like biological species, compete for resources and that those with superior organization are more likely to survive and advance. It views social development as a natural selection process where more complex forms eventually replace simpler ones.

64. (B) Receiving a scholarship for academic excellence.
A positive sanction is a reward used to encourage behavior that conforms to social expectations. Receiving a scholarship is a clear example, as it provides a tangible benefit for demonstrating high academic achievement. This contrasts with negative sanctions like fines or warnings, which are intended to punish deviance and discourage behavior that violates established laws or community-held social norms and values.

65. (B) 2-4-1-3
In Toynbee's theory, a civilization's history begins with a challenge, to which it must provide a creative response. A successful response leads to a period of growth. However, when the civilization can no longer effectively respond to new challenges, it experiences a breakdown. This sequence—Challenge, Response, Growth, and Breakdown—describes the cyclical nature of civilizational development as envisioned by Toynbee.

66. (A) Society works to restore a state of stability.
In the functionalist equilibrium model, society is viewed as a self-regulating system. When a disturbance or change occurs, the various interrelated parts of the social system adjust to accommodate the shift. This process is designed to return the society to a state of balance and stability. Functionalists believe that institutions naturally work together to minimize chaos and maintain the social body.

67. (C) Rapid and uneven patterns of social change.
Social disorganization is primarily caused by rapid and uneven patterns of social change. When one part of society, such as technology, changes much faster than others, like the legal or moral systems, the result is a breakdown in social cohesion. This lack of synchronization means that old rules no longer apply effectively to new situations, leading to increased social conflict.

68. (D) Change is always beneficial for all sections.
The statement that change is always beneficial for all sections of society is incorrect. Social change often benefits some groups while disadvantaging others, particularly those with vested interests in the status quo. For example, industrialization may create wealth for owners but lead to the displacement of rural laborers. Change is a complex process with varied impacts across different social hierarchies.

69. (C) Courts
Adjudication is the formal process of resolving disputes and determining the application of laws in specific cases. The courts are the official agency of social control responsible for this function. By interpreting legal statutes and rendering binding decisions, the judiciary settles conflicts and enforces social rules. This formal legal process ensures that justice is administered through an organized, state-sanctioned institutional framework.

70. (A) P-2, Q-4, R-1, S-3
Sociological theories are linked to specific proponents who shaped their core ideas. Herbert Spencer is the father of evolutionary theory. Oswald Spengler is famous for his cyclical view of civilizations. Karl Marx is the primary figure in conflict theory, focusing on class struggles. Talcott Parsons developed the equilibrium model

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new social classes and power dynamics, forcing the entire social system to reorganize accordingly.

35. (A) Both A and R are true and R is the correct explanation of A.
Rapid industrialization often triggers social disorganization because the speed of economic transformation outpaces the ability of social institutions to adapt. Traditional norms and family structures may become ill-suited for the new industrial environment, leading to a breakdown in social cohesion. This lack of alignment between old values and new economic realities results in instability and increased deviant social behavior.

36. (A) Statement I is correct, but Statement II is incorrect.
Demographic factors, such as birth rates and migration patterns, are significant drivers of social change. They directly impact the size and composition of the labor market and place new demands on family structures and social services. The assertion that these factors have no impact is incorrect, as a shrinking or growing population fundamentally alters the economic and social priorities.

37. (C) Spread of Western values in traditional societies.
Cultural factors of social change involve shifts in beliefs, values, and ideologies. The spread of Western values, such as individualism or secularism, into traditional societies is a major cultural driver that alters local customs and social relationships. Unlike natural disasters, these shifts originate in the realm of ideas and symbolic meanings, leading to the transformation of long-established social practices.

38. (B) Legislation, revolutions, and shifts in power.
Political factors drive social change through the exercise of power and authority. This includes the enactment of new laws, the occurrence of political revolutions, and changes in government leadership. Such events can redistribute resources, grant new rights to citizens, or completely overhaul the social hierarchy. By providing the legal framework for society, political actions determine the direction and pace of change.

39. (D) Herbert Spencer
Herbert Spencer is the key figure associated with the evolutionary theory of social change. He applied biological concepts to the study of society, suggesting that social systems evolve from simple, undifferentiated forms to complex, specialized ones. Spencer believed this process was a natural and inevitable progression toward higher levels of organization, mirroring the way complex organisms develop from simpler biological structures.

40. (A) 1 and 2 only
Spencer's evolutionary theory posits that societies progress from simple to complex structures, much like biological organisms. This perspective views social change as a linear advancement toward greater specialization and integration. However, the theory does not suggest that society moves toward chaos; instead, it argues that evolution leads to a more sophisticated and stable order through the process of social differentiation.

41. (C) Stages of rise, peak, and decline like a life cycle.
Cyclical theory suggests that societies and civilizations undergo repetitive patterns rather than linear progress. Like a biological life cycle, a society is seen to experience stages of birth, growth, maturity, and eventual decline. This perspective implies that history moves in cycles, where once a civilization reaches its peak, it inevitably faces decay, only for new forms to emerge and repeat.

42. (A) Cyclical Theory
Oswald Spengler's "The Decline of the West" is a quintessential example of cyclical theory. In this work, he argues that civilizations are like living organisms with a limited lifespan, moving through phases of youth, maturity, and old age. Spengler believed that Western civilization had reached its peak and was entering a period of inevitable decline, illustrating the repetitive nature of history.

43. (D) Cyclical Theory
Arnold Toynbee's "Challenge and Response" theory is part of the cyclical school of thought. He argued that civilizations rise by successfully meeting environmental or social challenges through creative leadership. However, when they

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26. (A) Alterations in social structures and cultural patterns.
Social change involves significant modifications in the patterns of social relationships, institutions, and cultural symbols over time. It refers to how the organization of a society, including its roles and norms, evolves. Unlike simple changes in weather or individual residence, true social change is a collective phenomenon that impacts the fundamental way a community functions and understands its shared reality and values.

27. (D) Universality
Universality is a core characteristic of social change, indicating that it is a global phenomenon occurring in all societies throughout history. No society remains completely static; whether modern or traditional, every community experiences shifts in its structure and culture over time. While the rate and direction of change may vary significantly between regions, the existence of change itself is an inescapable reality.

28. (B) Planned — Always occurs by accident
The pair describing planned change as always occurring by accident is incorrect. Planned social change is deliberate and conscious, often initiated by governments or organizations through policies and legislation. In contrast, unplanned change occurs spontaneously due to factors like natural disasters. Therefore, identifying planned change with accidental occurrences contradicts the very definition of intentional social engineering and organized societal reform programs.

29. (C) Cultural lag
Cultural lag is a concept introduced by William Ogburn to describe the period of maladjustment when material culture, such as technology, advances more rapidly than non-material culture, like values and laws. This gap often causes social tension because the traditional norms of a society may not be equipped to handle the implications of new inventions, leading to various forms of friction.

30. (A) P-2, Q-1, R-3, S-4
Social concepts are distinct in their descriptions of societal dynamics. Cultural lag refers to the imbalance between technological progress and moral development. Social disorganization describes the breakdown of traditional institutions. Social change is defined as the general alteration of social structures. Finally, resistance to change occurs when individuals or groups with vested interests oppose new ways to protect their existing status.

31. (D) Failure of rules to inhibit impulsive behavior.
Social disorganization arises when the existing rules and norms of a society lose their influence over individual conduct. This breakdown occurs when traditional institutions fail to provide clear guidance or when social change is so rapid that old regulations become obsolete. As a result, impulsive behavior and deviance increase because the collective mechanisms for maintaining order are no longer effective.

32. (B) Fear of the unknown and attachment to tradition.
People often resist social change due to psychological factors such as a fear of the unknown and a deep emotional attachment to long-standing traditions. New ways of living can threaten established habits and social identities. Additionally, individuals may worry that changes will disrupt their comfort or lead to unpredictable consequences, causing them to cling to familiar customs and practices.

33. (B) The internet's impact on global communication.
Technological factors of social change involve inventions and innovations that transform social life. The internet is a prime example, as it has revolutionized how people communicate, work, and access information globally. By collapsing geographical barriers and accelerating the exchange of ideas, such technological advancements force societies to adapt their social structures, legal systems, and cultural norms to a new reality.

34. (A) Changes in the modes of production and distribution.
Economic factors drive social change through transformations in how goods and services are produced and distributed. For instance, shifting from an agrarian economy to an industrial one fundamentally alters family structures, labor relations, and urbanization patterns. These changes in the material basis of society create

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do not qualify as social change unless they accumulate and eventually impact the wider social organization. Therefore, for a change to be sociologically significant, it must transcend the individual level and alter society itself.

53. (C) A prison sentence
A sanction is a reaction to behavior that is intended to ensure compliance with norms. A negative sanction involves a punishment to discourage deviance. A prison sentence is a formal negative sanction used by the state to penalize law-breakers. In contrast, public praise, salary hikes, and letters of appreciation are positive sanctions designed to reward and encourage socially desirable behavior.

54. (B) Social change
The shift from joint family structures to nuclear ones due to industrialization is a clear instance of social change. This transformation involves an alteration in the fundamental social institution of the family and the roles of its members. As economic conditions changed, the large family became less practical in urban settings, leading to a new pattern of social organization.

55. (A) Both A and R are true and R is the correct explanation of A.
Technology is a primary driver of social change because it alters the material conditions of human life. When new tools are introduced, they change the way people interact, perform labor, and organize their daily routines. These shifts in material culture eventually force changes in values and social structures, proving that technological innovation is a fundamental cause of broad societal transformation.

56. (A) Family
The family is an informal agency of social control because its influence is based on personal relationships and unwritten traditions. In contrast, the law, police, and prisons are formal agencies. They are organized institutions of the state that operate through codified statutes and bureaucratic procedures. While the family shapes early personality, it lacks the legal authority to impose standardized state punishments.

57. (C) Internalization
Internalization occurs when individuals adopt social norms so thoroughly that they follow them as a matter of personal conscience. This process makes the norms a part of the individual's identity, leading to automatic conformity without the need for external surveillance. It is the result of successful socialization, where the standards of society are transformed into the internal moral compass of individuals.

58. (A) Cultural — Discovery of iron
The discovery of iron is primarily a technological or material factor of social change rather than a cultural one. While it eventually affects culture, the invention of new materials and tools falls under the technological category. Economic, demographic, and political factors are correctly paired with industrial revolutions, migration, and election results, respectively, as these represent changes in production, population, and power.

59. (D) Cultural lag
Cultural lag refers to the specific tension that occurs when a society's non-material culture, such as its beliefs and ethical systems, fails to keep pace with rapid advancements in material culture, like technology. This concept explains why societies often experience conflict and adjustment problems when new inventions outstrip the existing social and moral guidelines designed to regulate human behavior and interactions.

60. (C) 1 and 3 only
Internalization is the hallmark of successful socialization, as individuals adopt social rules as their own. It significantly increases the efficiency of social control because people regulate themselves, reducing the need for constant external supervision. Therefore, the second statement is incorrect, as internalization aims to move beyond the need for continuous oversight by making conformity a natural and self-driven psychological process.

61. (C) Deliberate, codified, and organized control.
Formal social control is characterized by its organized and deliberate nature. It involves the use of codified laws and official regulations that are enforced by state-authorized institutions. This type of control is explicit and standardized,

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(B) P-1, Q-2, R-3, S-4
(C) P-4, Q-3, R-2, S-1
(D) P-2, Q-1, R-4, S-3

91. Internalization is a mechanism of social control that operates at the:
(A) Institutional level
(B) Legislative level
(C) International level
(D) Individual/Psychological level

92. Read the following statements and select the correct option:
Statement I: Cyclical theories believe that history repeats itself in civilizations.
Statement II: Evolutionary theories believe that change is always circular and returns to the start.
(A) Statement I is correct, but Statement II is incorrect.
(B) Statement II is correct, but Statement I is incorrect.
(C) Both statements are correct.
(D) Neither statement is correct.

93. Which of the following is a negative means of social control?
(A) A certificate of merit.
(B) A verbal compliment.
(C) Social boycotting.
(D) A cash prize.

94. What is the main cause of "Resistance to Change"?
(A) A universal desire for constant novelty.
(B) The speed of light.
(C) The excess of natural resources.
(D) Fear of losing power or status.

95. Read the following assertion and reason and select the correct option:
Assertion (A): Law is more effective in modern, complex societies than in small primitive ones.
Reason (R): Informal controls like gossip are less effective in large, anonymous urban populations.
(A) Both A and R are true and R is the correct explanation of A.
(B) Both A and R are true but R is not the correct explanation of A.
(C) A is true but R is false.
(D) A is false but R is true.

96. Which theory of social change focuses on the concept of "equilibrium"?
(A) Conflict Theory
(B) Functionalist Theory
(C) Evolutionary Theory
(D) Cyclical Theory

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97. Which of the following is an example of an informal agency of social control?
(A) High Court
(B) Neighborhood Community
(C) State Police
(D) District Jail

98. Which of the following is an INCORRECT statement?
(A) Karl Marx believed that social change is always harmonious and consensual.
(B) Socialization is a primary tool for social control.
(C) Cultural lag is a term coined to explain the gap between material and non-material culture.
(D) Population growth can lead to significant social changes.

99. The "Police" as an agency of social control primarily focuses on:
(A) Internalization of core cultural values and norms.
(B) Promoting specific religious dogmas and rituals.
(C) Enforcement of formal laws and social rules.
(D) Strengthening internal family bonds and loyalty.

100. Identify which of the following statements about "Social Change" are correct:
1. It is a continuous process.
2. Its speed is uniform across all societies and all times.
3. It can be both planned and unplanned.
(A) 1 and 2 only
(B) 2 and 3 only
(C) 1 and 3 only
(D) 1, 2, and 3

within functionalism to explain how social systems maintain their stability.

71. (D) Using sarcasm or praise.
Peer groups use informal sanctions to regulate the behavior of their members. These sanctions are spontaneous and unwritten, taking the form of sarcasm, ridicule, or verbal praise. By expressing approval or disapproval through these social interactions, peer groups pressure individuals to conform to shared expectations. Unlike formal legal punishments, these mechanisms rely on the psychological need for acceptance within the group.

72. (B) Statement II is correct, but Statement I is incorrect.
Social change can be triggered by both external and internal factors. External factors include events like foreign invasions. However, internal factors such as new inventions, ideological shifts, or demographic changes are equally important drivers of transformation within a society. The claim that change is only caused by external forces is false, as societies are dynamic systems capable of self-initiated evolution.

73. (C) Informal Agencies — Rituals and Customs
Rituals and customs are correctly identified as informal agencies of social control because they rely on tradition and social consensus rather than legal statutes. Formal agencies involve organized bodies like the police, while negative means include punishments. Positive means utilize rewards instead of penalties. Therefore, the pairing of informal agencies with cultural practices like rituals and customs is an accurate match.

74. (A) Norms become part of the individual's own conscience.
Internalization is the process by which an individual adopts social norms as their own personal values. Once a norm is internalized, it becomes part of the individual's conscience, guiding their behavior from within. This means that the person follows social rules because they believe it is morally correct to do so, rather than out of fear of being caught or punished.

75. (A) Both A and R are true and R is the correct explanation of A.
Modernization is frequently associated with Westernization because the historical processes of industrialization, urbanization, and secularization first gained momentum in Western Europe and North America. As these nations developed advanced technology and democratic institutions, their cultural and economic models became the standard for modern progress globally. Consequently, many societies pursuing modernization often adopt Western-style structures as part of their development.

76. (B) Increased social solidarity and group harmony.
Increased social solidarity and group harmony are positive outcomes rather than problems of social change. Common problems include resistance from groups with vested interests, cultural lag between technology and values, and periods of social disorganization. These issues represent the friction and instability that often accompany the transformation of social structures. Solidarity, conversely, indicates a successful integration of members within society.

77. (C) Setting agendas and labeling deviant behaviors.
The media acts as an agency of social control by setting the public agenda and defining what is considered deviant. By reporting on certain behaviors, it shapes public perception of right and wrong. When the media labels specific actions as criminal or immoral, it reinforces social boundaries and encourages conformity. This influence works through the construction of public opinion rather than law.

78. (D) Marx — Stability and Harmony
The pair linking Karl Marx with stability and harmony is incorrect. Marx's conflict theory emphasizes that social change is driven by class struggle and inevitable tension between the dominant and subordinate groups. He did not view society as a harmonious system but as one defined by exploitation. The other pairs correctly associate Spengler with decline, Spencer with complexity, and Ogburn with cultural lag.

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(D) A is false but R is true.

51. What is the defining characteristic of "one-way communication"?
(A) It involves high levels of immediate interaction.
(B) The receiver becomes the sender almost immediately.
(C) Information flows from sender to receiver without a response.
(D) It is only used in intimate interpersonal settings.

52. In the context of non-verbal communication, what does "Kinesics" study?
(A) Voice pitch
(B) Personal space
(C) Touch patterns
(D) Body movements and facial expressions

53. Which of the following is an example of a "Semantic" barrier?
(A) A broken microphone during a professional speech.
(B) A receiver who is feeling very angry or distressed.
(C) Use of specialized technical terms with a layperson.
(D) Sitting too far away from a speaker in a hall.

54. The concept of "logos" in Aristotle's rhetoric refers to the use of:
(A) Authority and reputation
(B) Evidence and logic
(C) Sympathy and pity
(D) Vivid imagery and metaphors

55. Match List-I with List-II and select the correct answer using the codes given below:
List-I: (Non-verbal Types)
P. Proxemics
Q. Paralanguage
R. Kinesics
S. Haptics
List-II: (Examples)
1. Handshake
2. Sitting distance
3. Shrugging shoulders
4. Speaking slowly
Codes:
(A) P-2, Q-4, R-3, S-1
(B) P-1, Q-2, R-4, S-3
(C) P-3, Q-1, R-2, S-4
(D) P-4, Q-3, R-1, S-2

56. In health communication, the use of "fear appeals" is often intended to:
(A) Motivate people to adopt preventive health behaviors.
(B) Make the audience feel helpless and without agency.
(C) Amuse the audience with dark or satirical humor.
(D) Distract people from seeking actual medical advice.

57. Which model of communication was the first to introduce the concept of "Noise"?
(A) Aristotle's Model
(B) Lasswell's Model
(C) Shannon-Weaver Model
(D) Berlo's SMCR Model

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58. Informal communication in an organization is often called:
(A) The Grapevine
(B) The Pipeline
(C) The Chain
(D) The Network

59. A "two-sided message" is most effective when the audience is:
(A) Uneducated or uninformed.
(B) Highly supportive of the speaker.
(C) In a hurry to receive information.
(D) Likely to be exposed to opposing viewpoints.

60. Consider the following statements about non-verbal communication:
1. It can contradict verbal messages.
2. It is often culturally specific.
3. It includes written text.
Which of the above statement(s) is/are correct?
(A) 1 and 2 only
(B) 2 and 3 only
(C) 1 and 3 only
(D) 1, 2, and 3

61. Which of the following is the most appropriate description of interpersonal communication?
(A) Communication within one's own internal mind.

progression is a universal pattern of social growth, leading to more integrated and sophisticated forms of organization.

88. (A) Law — Informal Agency
The pair identifying law as an informal agency is incorrect. Law is a primary formal agency of social control because it consists of written, codified rules enforced by official state institutions like the police and the courts. In contrast, family, religion, and peer groups are informal agencies, as they rely on personal influence, traditions, and moral codes rather than on bureaucratic structures.

89. (C) Rapid change outpacing institutional adaptation.
Social disorganization frequently occurs when the pace of social change is so rapid that existing institutions, such as the family or the legal system, cannot adapt quickly enough. This lag creates a vacuum where old norms are no longer effective, but new ones have not yet been established. The resulting lack of clear guidelines for behavior leads to increased social instability.

90. (A) P-3, Q-4, R-1, S-2
Social change is driven by various factors that impact different aspects of life. Technological factors include automation in factories. Demographic factors are seen in declining infant mortality rates. Cultural factors involve the globalization of music. Finally, economic factors are reflected in the rise of the middle class. These examples demonstrate how changes in specific sectors lead to broader shifts in social structures.

91. (D) Individual/Psychological level
Internalization is a mechanism of social control that operates at the individual and psychological level. It occurs when a person adopts social norms as their own internal beliefs through the process of socialization. Because the individual believes in the rightness of these rules, they regulate their own behavior even without external supervision. This makes social control a part of the person's conscience.

92. (A) Statement I is correct, but Statement II is incorrect.
Cyclical theories posit that history repeats itself as civilizations undergo repetitive cycles of rise and fall. This view is distinct from evolutionary theories, which typically see social change as a linear progression from simple to complex forms. The second statement is incorrect because evolutionary theory does not believe change returns to the start; instead, it argues for advancement toward more sophisticated structures.

93. (C) Social boycotting.
Negative means of social control are punishments used to discourage behavior that violates norms. Social boycotting is an example of an informal negative sanction where a community collectively refuses to associate with an individual. Unlike positive rewards such as certificates or prizes, boycotting uses exclusion and social pain to pressure the individual to conform to the group's established expectations and moral standards.

94. (D) Fear of losing power or status.
A major cause of resistance to change is the fear that new social arrangements will lead to a loss of power, status, or economic advantage. Individuals and groups who benefit from the existing system often have a vested interest in maintaining the status quo. They may oppose reforms that threaten their influence, leading them to actively obstruct the process of societal transformation.

95. (A) Both A and R are true and R is the correct explanation of A.
Law becomes more crucial in large, complex societies because the informal controls that work in small villages, like gossip, lose their effectiveness in anonymous urban settings. In cities, individuals can often escape the scrutiny of neighbors, making formal legal sanctions necessary to maintain order. Therefore, the growth of formal institutions is a direct response to the decreasing power of interpersonal pressure.

96. (B) Functionalist Theory
Functionalist theory focuses on the concept of equilibrium to explain social change and stability. It views society as a system of interrelated parts that strive to maintain a balanced state. When an internal or external change disrupts this balance, the system undergoes adjustments to restore a new state of equilibrium. This perspective

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2. It is generally slower than one-way communication.
3. It increases the accuracy of the information transferred.

Which of the above statement(s) is/are correct?
(A) 1 and 2 only
(B) 2 and 3 only
(C) 1 and 3 only
(D) 1, 2, and 3

11. What term refers to the use of personal space and distance in non-verbal communication?
(A) Kinesics
(B) Chronemics
(C) Haptics
(D) Proxemics

12. Which aspect of non-verbal communication includes voice quality, pitch, and volume?
(A) Proxemics
(B) Paralanguage
(C) Gestures
(D) Body language

13. The Shannon-Weaver model of communication is often criticized for being:
(A) Overly complex in its description of the internal psychological states.
(B) Non-linear and circular in its portrayal of the communication cycle.
(C) Primarily linear and focused on technical noise in the channel.
(D) Focused exclusively on interpersonal relations and social feedback loops.

14. In Lasswell's model of communication, the component "In which channel" refers to:
(A) The audience
(B) The effect
(C) The message
(D) The medium

15. The following question consists of two statements — Assertion (A) and Reason (R). Answer the question by selecting the appropriate option.
Assertion (A): Feedback is a crucial component of two-way communication.
Reason (R): It enables the sender to evaluate the effectiveness of the message and ensures mutual understanding.
(A) Both A and R are true and R is the correct explanation of A.
(B) Both A and R are true but R is not the correct explanation of A.
(C) A is true but R is false.
(D) A is false but R is true.

16. Berlo's SMCR model stands for:
(A) System, Message, Channel, Response
(B) Source, Message, Channel, Receiver
(C) Social, Message, Context, Receiver
(D) Source, Medium, Context, Response

17. Which model of communication emphasizes the circular nature of the process where both parties act as encoders and decoders?
(A) Aristotle's Model
(B) Osgood-Schramm Model
(C) Berlo's SMCR Model
(D) Shannon-Weaver Model

18. Persuasive communication is primarily intended to:
(A) Influence the attitudes, beliefs, or behaviors of the receiver.
(B) Coerce the receiver into an action through the use of threats.
(C) Inform the receiver about neutral, non-controversial factual data.
(D) Establish a formal permanent record of a specific transaction.

19. The fundamental difference between persuasion and coercion is that persuasion:
(A) Involves the direct use of physical or administrative force.
(B) Denies the receiver any alternative choice or freedom of will.
(C) Relies on free will and psychological influence to gain consent.
(D) Is always utilized for deceptive or inherently unethical purposes.

20. Arrange the following steps of the communication process in the correct sequence:
1. Decoding
2. Encoding
3. Transmission
4. Feedback

(A) 2-3-1-4
(B) 3-2-1-4

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CHAPTER 24
Communication and Persuasion

1. Which of the following best defines the nature of communication as a process?
(A) A static, linear transfer of information from a source to a fixed destination.
(B) A continuous and dynamic interaction involving the exchange of symbols.
(C) A one-time communicative event where a sender provides a specific directive.
(D) An internal mental activity that does not involve any external participants.

2. In the communication process, the conversion of thoughts into symbols or language is known as:
(A) Encoding
(B) Transmission
(C) Decoding
(D) Feedback

3. Which element of communication acts as the medium through which a message is sent?
(A) Receiver
(B) Feedback
(C) Channel
(D) Noise

4. Which type of communication is characterized by the absence of spoken or written words?
(A) Verbal communication
(B) Formal communication
(C) Interpersonal communication
(D) Non-verbal communication

5. Match List-I with List-II and select the correct answer using the codes given below:
List-I: (Communication Elements)
P. Sender
Q. Message
R. Receiver
S. Feedback
List-II: (Functions)
1. The response to a message
2. The person who interprets the message
3. The person who initiates communication
4. The information being conveyed
Codes:
(A) P-3, Q-4, R-2, S-1
(B) P-4, Q-3, R-1, S-2
(C) P-1, Q-2, R-3, S-4
(D) P-2, Q-1, R-4, S-3

6. Which type of communication follows officially established professional channels and hierarchies?
(A) Informal communication
(B) Formal communication
(C) Diagonal communication
(D) Horizontal communication

7. Communication between two individuals, such as a conversation between friends, is categorized as:
(A) Mass communication
(B) Intrapersonal communication
(C) Public communication
(D) Interpersonal communication

8. Which of the following is an example of two-way communication?
(A) Participating in a classroom discussion
(B) Reading a printed textbook
(C) Watching a pre-recorded news broadcast
(D) Listening to a radio announcement

9. Semantic barriers in communication are primarily related to:
(A) Physical distance separating the sender from the intended receiver.
(B) Technical glitches occurring within the electronic transmission channel.
(C) Differences in the interpretation of various language and symbols.
(D) Emotional instability or psychological state of the individual receiver.

10. Consider the following statements regarding two-way communication:
1. It allows for the immediate clarification of doubts.

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79. (A) Change is a global phenomenon in every society.
Universality in the context of social change means that change is a global phenomenon present in every human society. No community remains completely static; every society, regardless of its location, undergoes transformations in its structure and culture over time. While the specific nature and speed of change may differ, the process itself is a fundamental and unavoidable characteristic of social life.

80. (C) 1 and 3 only
Conflict theory views social change as a product of struggles between different social classes over power and economic resources. It emphasizes that disparities between dominant and subordinate groups create tensions that lead to societal transformation. The second statement is incorrect because conflict theory often suggests that change can be sudden and revolutionary rather than always being a slow and peaceful process.

81. (B) Positive means
Positive means of social control utilize rewards and incentives to encourage individuals to follow social norms. These can include material rewards like bonuses or symbolic ones like praise and awards. By creating a system where conformity leads to benefits, society motivates people to behave in predictable and desirable ways. This approach focuses on reinforcement rather than punishment, which characterizes negative control mechanisms.

82. (A) Deviance threatens social stability and order.
Deviance refers to any behavior that breaks established social norms, which can disrupt the predictability and stability of a community. Because such actions threaten the existing social order, they trigger the application of social control mechanisms. By penalizing deviant acts and rewarding conformity, society attempts to restore balance and ensure that its members adhere to the shared rules necessary for collective life.

83. (C) Transition from traditional to industrial forms.
Modernization is best defined as the comprehensive transition of a society from traditional, agrarian-based structures to modern, industrial, and urbanized ones. This process involves significant shifts in technology, economic production, and social organization. It typically includes the rise of scientific thinking and increased social mobility. Modernization represents a fundamental evolution in how human societies operate through rational and technological progress.

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84. (D) Religious Taboos
Religious taboos are informal means of social control because they are based on spiritual beliefs and traditional prohibitions rather than state laws. They are enforced through moral pressure and the fear of supernatural consequences. In contrast, the Indian Penal Code, university regulations, and traffic rules are formal mechanisms, as they are codified, organized, and administered by official institutions with legal authority.

85. (A) Both A and R are true and R is the correct explanation of A.
Social control is absolutely essential for the survival of any society because it prevents the chaos that would result from unregulated individual behavior. Without mechanisms to ensure conformity and order, collective life would become impossible, as interactions would be unpredictable and conflict-ridden. Therefore, the maintenance of social control is a fundamental requirement for the persistence of social structures and group goals.

86. (B) Passage of the Right to Education legislation.
The passage of legislation, such as the Right to Education, is a clear example of a political factor causing social change. This action represents the use of state authority to transform social rights and institutional structures. By enacting new laws, the government can redistribute resources and reshape the opportunities available to citizens, thereby driving significant shifts in the entire social fabric.

87. (D) Evolutionary Theory
Evolutionary theory views social change as a process of increasing social differentiation and complexity. Inspired by biological evolution, this perspective suggests that societies naturally develop from simple groups into complex ones with highly specialized roles and institutions. Proponents like Herbert Spencer argued that this

(C) 2-1-3-4
(D) 1-2-3-4

21. According to Aristotle, "ethos" as an element of persuasion refers to:
(A) The emotional appeal to the audience
(B) The logical reasoning of the argument
(C) The credibility and character of the speaker
(D) The aesthetic quality of the speech

22. In the Elaboration Likelihood Model (ELM), which route is taken when the audience is highly motivated and able to process information?
(A) Peripheral route
(B) Central route
(C) Emotional route
(D) Subconscious route

23. Which of the following is a characteristic of the peripheral route to persuasion?
(A) Deep, systematic analysis of the core content within a message.
(B) Long-term attitude change based on extensive cognitive processing.
(C) High levels of cognitive effort required from the message receiver.
(D) Reliance on external cues like source attractiveness or celebrity.

24. Source credibility is determined by which two main factors?
(A) Expertise and trustworthiness
(B) Wealth and power
(C) Age and experience
(D) Popularity and physical strength

25. Match List-I with List-II and select the correct answer using the codes given below:
List-I: (Aristotle's Elements)
P. Pathos
Q. Logos
R. Ethos
S. Rhetoric
List-II: (Description)
1. Logical appeal
2. Emotional appeal
3. The art of persuasion
4. Ethical appeal/Credibility
Codes:
(A) P-1, Q-2, R-3, S-4
(B) P-2, Q-1, R-4, S-3
(C) P-4, Q-3, R-2, S-1
(D) P-3, Q-4, R-1, S-2

26. Which of the following message strategies is most effective when the audience is already well-informed and potentially disagrees with the speaker?
(A) Two-sided message
(B) Non-verbal message
(C) One-sided message
(D) Implicit message

27. Fear appeals in persuasive communication are most effective when:
(A) They cause extreme terror without providing any feasible solution.
(B) They are utilized for low-stakes issues with minimal personal impact.
(C) The audience has no personal relevance to the presented threat.
(D) They are paired with a clear, achievable recommendation for action.

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28. According to Brehm's Reactance Theory, people resist persuasion when:
(A) The message is perceived as being too complex for comprehension.
(B) They feel their freedom of choice is being actively threatened.
(C) The source of information is considered to be highly attractive.
(D) The message aligns directly with their existing personal beliefs.

29. McGuire's Inoculation Theory suggests that resistance to persuasion can be built by:
(A) Providing only the strongest possible arguments in favor of a position.
(B) Completely isolating the individual from any outside source of information.
(C) Exposing the person to weak versions of opposing arguments and refutations.
(D) Using aggressive fear-based propaganda to discourage alternative viewpoints.

30. Consider the following statements regarding the Elaboration Likelihood Model (ELM):
1. Peripheral processing leads to temporary attitude change.
2. Central processing requires both motivation and ability.

emphasizes how institutions work together to ensure the continued functioning.

97. (B) Neighborhood Community
A neighborhood community is an informal agency of social control because it regulates behavior through personal relationships and local norms. It lacks the codified laws and official authority of formal agencies like courts or police. In a neighborhood, control is exercised through mechanisms such as gossip or approval, which influence individuals to conform to local expectations without the intervention of state power.

98. (A) Karl Marx believed that social change is always harmonious and consensual.
The statement that Karl Marx viewed social change as harmonious is incorrect. Marx's conflict theory is built on the premise that change is the result of struggle and class conflict rather than consensus. He believed that the inherent contradictions in the economic system lead to revolutionary shifts. The other statements correctly describe socialization as a tool and cultural lag as a gap.

99. (C) Enforcement of formal laws and social rules.
The police, as a formal agency of social control, primarily focus on the enforcement of codified laws and the maintenance of public order. Their role is to ensure that individuals adhere to the legal statutes of the state through official authority. Unlike the family or religion, the police do not focus on spiritual growth, but on preventing and penalizing legal violations.

100. (C) 1 and 3 only
Social change is a continuous process that can be both planned, through government policies, and unplanned, through spontaneous events. However, its speed is not uniform; the rate of change varies significantly across different societies and historical periods. While some societies experience rapid transformation due to technological revolutions, others may change much more slowly. Thus, the second statement regarding uniform speed is incorrect.

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Q. Mathematical Model
R. Formula of "Who says what"
S. Circular Model
List-II: (Proponents)
1. Shannon and Weaver
2. Berlo
3. Osgood and Schramm
4. Lasswell
Codes:
(A) P-2, Q-1, R-4, S-3
(B) P-1, Q-2, R-3, S-4
(C) P-4, Q-3, R-2, S-1
(D) P-3, Q-4, R-1, S-2

41. In the Osgood-Schramm model, what happens to the message during communication?
(A) It is permanently lost in environmental noise.
(B) It is sent only once from sender to receiver.
(C) It is continuously interpreted and re-interpreted by both parties.
(D) It is filtered by a professional gatekeeper.

42. Source attractiveness in persuasion is most effective when:
(A) The receiver is using the peripheral route.
(B) The topic is of high personal relevance.
(C) The receiver is using the central route.
(D) The message is based on complex logical data.

43. Which of the following is an audience characteristic that affects persuasion?
(A) The volume of the speaker's voice
(B) The color of the room
(C) The length of the message
(D) The level of intelligence of the receiver

44. A one-sided message is most effective when:
(A) The audience is well-educated.
(B) The audience already agrees with the sender's position.
(C) The audience is hostile to the sender.
(D) The audience is expected to hear opposing views later.

45. Consider the following statements regarding persuasion:
1. Persuasion is always unethical.
2. Persuasion requires the receiver's mental processing.
3. Persuasion can change long-term behavior.
Which of the above statement(s) is/are correct?
(A) 1 and 2 only
(B) 2 and 3 only
(C) 1 and 3 only
(D) 1, 2, and 3

46. Which of the following is NOT a component of the Shannon-Weaver model?
(A) Transmitter
(B) Receiver
(C) Noise
(D) Feedback

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47. In non-verbal communication, "Gestures" primarily involve:
(A) Movements of hands and body to express an idea.
(B) The strategic use of time during interactions.
(C) The physical distance maintained between two people.
(D) The specific tone and volume of a person's voice.

48. Psychological barriers to communication include:
(A) Loud music in the background
(B) Preconceived notions and biases
(C) Ambiguous words
(D) Poor internet connection

49. Which route of ELM leads to attitude changes that are more resistant to counter-persuasion?
(A) Peripheral route
(B) Central route
(C) Automatic route
(D) Emotional route

50. The following question consists of two statements — Assertion (A) and Reason (R). Answer the question by selecting the appropriate option.
Assertion (A): In mass communication, the feedback is usually delayed or indirect.
Reason (R): Mass communication involves a large and geographically dispersed audience.
(A) Both A and R are true and R is the correct explanation of A.
(B) Both A and R are true but R is not the correct explanation of A.
(C) A is true but R is false.

3. Source attractiveness is a central cue.

Which of the above statement(s) is/are correct?
(A) 1 and 2 only
(B) 2 and 3 only
(C) 1 and 3 only
(D) 1, 2, and 3

31. The "Forewarning Effect" refers to the phenomenon where:
(A) People develop counter-arguments when they know a persuasive attempt is coming.
(B) People become significantly more persuadable after receiving a generic warning.
(C) People ignore messages that are delivered too quickly for cognitive processing.
(D) People always follow the advice of an expert without checking their credentials.

32. Which of the following is a primary characteristic of propaganda?
(A) It always presents a balanced, two-sided view of a particular issue.
(B) It is a deliberate attempt to manipulate perceptions to achieve a specific intent.
(C) It relies solely on logical evidence and verifiable, peer-reviewed data.
(D) It is only used in interpersonal communication between two private individuals.

33. In public health campaigns, persuasion is used to:
(A) Compel citizens to pay higher taxes through legislative mandates.
(B) Encourage healthy behaviors like vaccination or smoking cessation.
(C) Secretly collect demographic data on citizens' private social lives.
(D) Replace professional medical treatment with commercial advertising.

34. Which of the following is NOT an element of Berlo's Source component?
(A) Noise level
(B) Attitudes
(C) Knowledge
(D) Communication skills

35. The following question consists of two statements — Assertion (A) and Reason (R). Answer the question by selecting the appropriate option.

Assertion (A): Non-verbal communication is often more powerful than verbal communication.

Reason (R): Non-verbal cues are frequently perceived as more spontaneous and harder to fake.
(A) Both A and R are true and R is the correct explanation of A.
(B) Both A and R are true but R is not the correct explanation of A.
(C) A is true but R is false.
(D) A is false but R is true.

36. Which barrier to communication involves noise, distance, and environment?
(A) Semantic barrier
(B) Psychological barrier
(C) Cultural barrier
(D) Physical barrier

37. "Grapevine" is a term commonly associated with:
(A) Formal communication
(B) Lateral communication
(C) Informal communication
(D) Visual communication

38. Mass communication differs from interpersonal communication because:
(A) It involves a direct, immediate feedback loop between participants.
(B) The audience is large, heterogeneous, and generally anonymous.
(C) It relies exclusively on non-verbal cues to convey information.
(D) It is always a one-way process with no measurable social effect.

39. Which of the following is an example of an INCORRECT pair regarding barriers to communication?
(A) Physical — Wall
(B) Psychological — Prejudice
(C) Semantic — Technical Jargon
(D) Physical — Emotional distress

40. Match List-I with List-II and select the correct answer using the codes given below:

List-I: (Model Types)
P. SMCR Model

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(B) Communication through official organizational memos.
(C) Communication between a few people with high feedback.
(D) Communication via television broadcast to a large nation.

62. Which of the following statements regarding persuasion and coercion is correct?
(A) Coercion allows for free choice and autonomy by the receiver.
(B) Propaganda is always based on purely objective scientific facts.
(C) Encoding is the primary responsibility of the message receiver.
(D) Persuasion involves the use of psychological influence rather than force.

63. Which theory explains that people might do the opposite of what they are told to do if they feel pressured?
(A) Reactance Theory
(B) Inoculation Theory
(C) Elaboration Likelihood Model
(D) Social Judgment Theory

64. What is the "source" in Berlo's SMCR model?
(A) The medium used
(B) The originator of the message
(C) The person who receives the message
(D) The noise in the environment

65. The following question consists of two statements — Assertion (A) and Reason (R). Answer the question by selecting the appropriate option.
Assertion (A): Source expertise increases the effectiveness of a persuasive message.
Reason (R): Receivers are more likely to accept a message if they perceive the sender as knowledgeable on the topic.
(A) Both A and R are true and R is the correct explanation of A.
(B) Both A and R are true but R is not the correct explanation of A.
(C) A is true but R is false.
(D) A is false but R is true.

66. Which type of communication is most likely to be used for mass mobilization in public health?
(A) Mass communication
(B) Informal grapevine
(C) Intrapersonal communication
(D) One-way formal memos

67. Which of the following pairs is incorrect?
(A) Aristotle — Ethos, Pathos, Logos
(B) Petty & Cacioppo — ELM
(C) Shannon & Weaver — Circular Model
(D) McGuire — Inoculation Theory

68. The "receiver" in the communication process is the one who:
(A) Initiates the message
(B) Encodes the message
(C) Eliminates the noise
(D) Decodes the message

69. In the ELM, "ability" to process a message refers to:
(A) The receiver's personal desire to learn new information.
(B) The sender's level of physical attractiveness or charisma.
(C) The receiver's cognitive capacity and lack of distractions.
(D) The communication channel's transmission speed and reliability.

70. Arrange these components of Lasswell's model in the standard order:
1. In which channel
2. Says what
3. Who
4. To whom
(A) 3-2-1-4
(B) 1-2-3-4
(C) 3-1-2-4
(D) 2-3-4-1

71. Which of the following is a barrier to effective communication?
(A) Active listening
(B) Clarity of message
(C) Prompt feedback
(D) Psychological prejudice

72. "Paralanguage" includes which of the following?
(A) Tone and pitch of voice
(B) Body posture
(C) Facial expressions
(D) Use of physical space

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94. Which of the following is an INCORRECT statement?
(A) Verbal communication includes both oral and written forms.
(B) Feedback helps in reducing the communication gap.
(C) Encoding is done by the sender.
(D) Proxemics refers to the study of body language.

95. In Berlo's model, "Communication Skills" of the sender include:
(A) Ability to read, write, and speak effectively.
(B) The total wealth and social status of the person.
(C) The physical height and appearance of the sender.
(D) The specific religious beliefs of the individual.

96. "One-way communication" is most efficient for:
(A) Complex negotiation involving multiple diverse stakeholders.
(B) Providing speed and simple directions to a group.
(C) Establishing a mutual understanding through dialogue.
(D) Building deep and lasting professional relationships.

97. Public health campaigns often use "two-sided messages" to:
(A) Intentionally confuse the public about a particular health issue.
(B) Address common misconceptions and effectively refute them.
(C) Promote two different commercial products at the same time.
(D) Make the message twice as long as a standard advertisement.

98. The "S" in Berlo's SMCR model stands for:
(A) Source
(B) Signal
(C) System
(D) Symbol

99. Non-verbal gestures that have a specific, direct verbal translation (like a "thumbs up") are called:
(A) Illustrators
(B) Affect displays
(C) Emblems
(D) Regulators

100. Which of the following is the best example of a "psychological" barrier?
(A) A faulty telephone line causing static during a call.
(B) A very loud air conditioner in a professional office.
(C) A foreign language the receiver does not understand.
(D) High levels of anxiety or stress in the receiver.

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(D) Logical route

84. What is the primary focus of Lasswell's model?
(A) Mathematical signal transmission and technical accuracy.
(B) The internal psychological state of the individual sender.
(C) The non-verbal cues present in interpersonal talk.
(D) The effects and components of mass communication.

85. The following question consists of two statements — Assertion (A) and Reason (R). Answer the question by selecting the appropriate option.
Assertion (A): Inoculation theory is compared to a medical vaccine.
Reason (R): It works by exposing the individual to a small dose of "attacking" information to build up "antibodies" of counter-arguments.
(A) Both A and R are true and R is the correct explanation of A.
(B) Both A and R are true but R is not the correct explanation of A.
(C) A is true but R is false.
(D) A is false but R is true.

86. Propaganda is different from general persuasion because propaganda:
(A) Is always objectively helpful to the general public.
(B) Is often ideologically driven and highly one-sided.
(C) Uses only logical appeals and verified evidence.
(D) Encourages active critical thinking in the audience.

87. Which of the following is a physical barrier to communication?
(A) Use of technical jargon
(B) Fear of the boss
(C) Differences in culture
(D) Poor lighting in a room

88. Two-way communication is most essential for:
(A) Effective learning and collaborative problem solving.
(B) Giving a quick emergency warning to a large crowd.
(C) Playing a pre-recorded music track for an audience.
(D) Sending a mass email to 10,000 employees at once.

89. In the context of ELM, "motivation" refers to:
(A) The physical energy and stamina of the message sender.
(B) The transmission speed of the communication channel used.
(C) The receiver's interest and involvement in the topic.
(D) The total volume or loudness of the message delivered.

90. Which of the following is a "Non-verbal" cue related to "Time"?
(A) Chronemics
(B) Proxemics
(C) Kinesics
(D) Paralanguage

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91. The term "Feedback" was first formally emphasized in which type of model?
(A) Linear models
(B) Mathematical models
(C) One-way models
(D) Circular/Interactive models

92. In persuasive communication, "source credibility" is highest when the speaker:
(A) Has something significant to gain personally from the message.
(B) Is perceived as an expert with no hidden agenda.
(C) Uses very aggressive language to dominate the conversation.
(D) Is completely unknown to the audience or public.

93. Reactance theory suggests that "scare tactics" in health campaigns might backfire if:
(A) The message is delivered in a way that is too clear.
(B) The message is delivered by a professional medical doctor.
(C) The audience feels their autonomy is being limited.
(D) The audience has high levels of academic intelligence.

balanced and credible. This strategy "inoculates" the audience against counter-arguments, making the speaker's own position seem more robust and logically sound in the face of existing or future conflicting information.

27. (D) They are paired with a clear, achievable recommendation for action.
Fear appeals are most successful when they do more than just scare the audience; they must also provide a clear and achievable solution. If the perceived threat is high but no effective response is offered, the audience may ignore the message out of helplessness. However, pairing a manageable level of fear with a specific recommendation encourages the audience to take protective action.

28. (B) They feel their freedom of choice is being actively threatened.
According to Reactance Theory, individuals experience a state of psychological tension when they perceive that their freedom of choice is being restricted. This often leads them to resist persuasion or even adopt the opposite behavior to re-establish their sense of autonomy. Effective communicators avoid overly aggressive or demanding language to prevent triggering this defensive response, which can undermine the persuasive goal.

29. (C) Exposing the person to weak versions of opposing arguments and refutations.
Inoculation Theory suggests that resistance to persuasion can be built in a manner similar to medical immunization. By exposing individuals to weak versions of counter-arguments along with effective refutations, they develop mental "antibodies." This process prepares them to defend their existing beliefs when they later encounter stronger persuasive attacks, making them less susceptible to being influenced by opposing viewpoints or propaganda.

30. (A) 1 and 2 only
In the Elaboration Likelihood Model, peripheral processing relies on external cues and typically leads to temporary attitude change. Conversely, central processing occurs only when the receiver has the motivation and cognitive ability to analyze the message. Source attractiveness is considered a peripheral cue, not a central one, as it does not relate to the logical strength of the core arguments presented.

31. (A) People develop counter-arguments when they know a persuasive attempt is coming.
The Forewarning Effect occurs when individuals are alerted in advance that someone will attempt to persuade them. This warning gives the audience time to mentally prepare and generate counter-arguments to defend their current position. As a result, they become more resistant to the subsequent persuasive message. This psychological defense mechanism highlights how awareness of intent can significantly decrease a communicator's influence.

32. (B) It is a deliberate attempt to manipulate perceptions to achieve a specific intent.
Propaganda is characterized by a deliberate and systematic attempt to shape perceptions, manipulate cognitions, and direct behavior to achieve a specific goal. It is often ideologically driven and may use biased or misleading information to promote a particular cause. Unlike balanced education, propaganda typically presents a one-sided view and relies on emotional manipulation rather than objective, two-sided logical reasoning.

33. (B) Encourage healthy behaviors like vaccination or smoking cessation.
Public health campaigns utilize persuasion to promote voluntary behaviors that improve individual and community well-being. Common goals include encouraging people to get vaccinated, quit smoking, or adopt better dietary habits. By using credible sources and relatable messages, these campaigns aim to influence attitudes and provide the necessary motivation for citizens to make positive lifestyle changes that enhance long-term health.

34. (A) Noise level
In Berlo's SMCR model, the Source component focuses on the internal characteristics of the sender, such as their communication skills, attitudes, knowledge level, and social system. Noise level is not a component of the source itself; rather, it is an environmental or channel-related factor that interferes with the transmission of the message. The model emphasizes how the sender's attributes shape the communication.

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ANSWERS

1. (B) A continuous and dynamic interaction involving the exchange of symbols.
Communication is defined as a continuous and dynamic interaction where participants exchange symbols to share meaning. Unlike static models, this perspective emphasizes that it is an ongoing activity subject to constant change. This process involves multiple stages, including sending and receiving messages, ensuring that the flow of information remains interactive rather than just a linear or one-way transfer.

2. (A) Encoding
Encoding represents the initial phase where a source translates internal thoughts, ideas, or feelings into a transmittable form. This involves selecting specific words, gestures, or symbols that the receiver can understand. It is a critical cognitive step because the effectiveness of the entire communication cycle depends on how well the sender packages the intended information into understandable symbols.

3. (C) Channel
The channel serves as the physical or technical medium used to convey a message from the sender to the receiver. Common examples include airwaves for spoken words, digital signals for emails, or paper for written letters. Selecting an appropriate medium is essential because it must accommodate the nature of the information and ensure that the message reaches its destination clearly.

4. (D) Non-verbal communication
Non-verbal communication encompasses all information transmitted without using spoken or written language. This includes facial expressions, body posture, eye contact, and physical gestures. Such cues often provide additional context or emotional depth to verbal interactions. Because it occurs through visual or tactile signals rather than words, it remains a powerful tool for conveying attitudes and feelings during social exchanges.

5. (A) P-3, Q-4, R-2, S-1
The sender initiates the interaction, while the message represents the actual information being conveyed. The receiver is the individual responsible for interpreting the incoming signals. Finally, feedback occurs when the receiver provides a response to the original message. This structured sequence ensures that communication is a complete cycle where meaning is shared, understood, and acknowledged by all participating parties.

6. (B) Formal communication
Formal communication operates through officially designated channels within an organization's structure. It follows the established chain of command and hierarchy, ensuring that information flows in an orderly and documented manner. This type of interaction is typically used for professional directives, reports, and policies, providing a reliable and authoritative source of information that supports the organization's goals and standard procedures.

7. (D) Interpersonal communication
Interpersonal communication involves the exchange of information and feelings between two or more individuals. This type of interaction is highly interactive and allows for immediate feedback and clarification. It often takes place in informal settings, such as a conversation between friends, where participants can use both verbal and non-verbal cues to build relationships and ensure mutual understanding within a shared context.

8. (A) Participating in a classroom discussion
Two-way communication is characterized by a reciprocal flow of information where both the sender and receiver actively participate. A classroom discussion serves as a primary example because students and teachers can ask questions and provide immediate responses. This interactive process facilitates better understanding, allows for the correction of misconceptions, and ensures that the message has been accurately received and interpreted.

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9. (C) Differences in the interpretation of various language and symbols.
Semantic barriers occur when there are misunderstandings regarding the meaning of words, symbols, or language. These obstacles often arise due to the use of technical jargon, ambiguous terminology, or cultural differences in linguistic interpretation. When the sender and receiver do not share the same understanding of specific terms, the intended message becomes distorted, leading to confusion and ineffective communication.

10. (D) 1, 2, and 3
Two-way communication provides a mechanism for the immediate clarification of doubts, which significantly enhances the accuracy of the information being transferred. While this interactive process is generally slower than one-way communication due to the constant feedback loop, it ensures that the message is understood correctly. This complexity makes it superior for tasks requiring high precision and mutual agreement between participants.

11. (D) Proxemics
Proxemics is the study of how humans use personal space and physical distance to communicate. The amount of space maintained between individuals during an interaction can signal the level of intimacy, social status, or the nature of their relationship. By understanding these spatial boundaries, communicators can better interpret social cues and adjust their behavior to suit different cultural and professional contexts.

12. (B) Paralanguage
Paralanguage refers to the non-verbal elements of voice that accompany speech, such as pitch, volume, intonation, and speaking rate. These vocal cues provide additional meaning and emotional context to the spoken words. By varying these elements, a speaker can emphasize specific points, convey urgency, or signal confidence, which significantly influences how the message is perceived and understood by the audience.

13. (C) Primarily linear and focused on technical noise in the channel.
The Shannon-Weaver model is often criticized for its linear structure, which depicts communication as a one-way flow from sender to receiver. Originally developed for telecommunications, it focuses heavily on technical aspects like signal transmission and environmental noise. This model is limited because it overlooks the complex psychological processes, social contexts, and interactive feedback loops inherent in human-to-human communication and meaning-making.

14. (D) The medium
In Lasswell's model, the question "In which channel" identifies the specific medium or vehicle used to carry the message to the audience. This could include mass media such as television, radio, and newspapers, or interpersonal modes like face-to-face speech. Identifying the channel is crucial because the choice of medium affects how the information is delivered and the resulting social impact.

15. (A) Both A and R are true and R is the correct explanation of A.
Feedback is an essential component of two-way communication because it allows the sender to verify if the message was understood as intended. By receiving a response, the sender can evaluate the effectiveness of the interaction and make necessary adjustments. This reciprocal process ensures mutual understanding between parties, confirming that the communication cycle is complete and that the desired goal was achieved.

16. (B) Source, Message, Channel, Receiver
Berlo's SMCR model outlines four fundamental components of the communication process: Source, Message, Channel, and Receiver. Each element is influenced by specific factors; for example, the source is affected by communication skills and attitudes, while the message consists of content and structure. This model emphasizes how the characteristics of both the sender and the receiver determine the overall success of the communication.

17. (B) Osgood-Schramm Model
The Osgood-Schramm model highlights the circular nature of communication, moving away from linear perspectives. In this framework, both participants are viewed as equal partners who simultaneously act as encoders, interpreters, and decoders. This continuous cycle emphasizes that communication is an ongoing process of

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negotiation where meaning is constantly being created and shared through active participation and the provision of immediate feedback.

18. (A) Influence the attitudes, beliefs, or behaviors of the receiver.
Persuasive communication is a deliberate effort to influence the internal states or external actions of an audience. Unlike purely informative communication, its goal is to change or reinforce specific attitudes, beliefs, and behaviors. This is achieved through the strategic use of logical arguments, emotional appeals, and credible sources, encouraging the receiver to voluntarily adopt the speaker's viewpoint or take action.

19. (C) Relies on free will and psychological influence to gain consent.
The primary distinction between persuasion and coercion lies in the element of choice. Persuasion relies on psychological influence and reasoning to gain the receiver's voluntary consent or agreement. In contrast, coercion involves the use of force, threats, or administrative pressure to compel an individual to act against their will. Persuasion respects the receiver's autonomy, allowing them to make an independent decision.

20. (A) 2-3-1-4
The communication process begins with encoding, where the sender converts thoughts into symbols. The next step is transmission, where the message is sent through a chosen channel. Upon arrival, the receiver performs decoding to interpret the message's meaning. Finally, feedback is provided to the sender, completing the cycle. This logical sequence ensures that information is successfully shared and understood by all participants.

21. (C) The credibility and character of the speaker
In Aristotle's rhetorical theory, ethos refers to the ethical appeal of the communicator. It focuses on the credibility, character, and expertise of the speaker as perceived by the audience. If the audience views the speaker as trustworthy and knowledgeable, they are significantly more likely to be persuaded by the message. Ethos establishes the foundation for a persuasive argument by building listener confidence.

22. (B) Central route
In the Elaboration Likelihood Model, the central route is taken when the audience possesses both the motivation and the cognitive ability to process information. This path involves a deep, systematic analysis of the message's core arguments and evidence. Attitudes formed through this route are typically more enduring and resistant to counter-persuasion because they result from extensive mental effort and careful logical evaluation.

23. (D) Reliance on external cues like source attractiveness or celebrity.
The peripheral route to persuasion occurs when the receiver is either unmotivated or unable to process the message deeply. Instead of analyzing logical arguments, they rely on external cues such as the speaker's attractiveness, celebrity status, or the mere number of arguments presented. Change occurring through this route is often temporary and less predictive of long-term behavior because it lacks cognitive depth.

24. (A) Expertise and trustworthiness
Source credibility is primarily determined by two key factors: expertise and trustworthiness. Expertise refers to the extent to which a speaker is perceived as having the necessary knowledge or skill regarding a topic. Trustworthiness involves the audience's perception of the speaker's honesty and lack of bias. When both factors are high, the source is viewed as highly credible and persuasive.

25. (B) P-2, Q-1, R-4, S-3
Aristotle's rhetorical elements serve distinct functions in persuasion. Pathos involves an emotional appeal to the audience, while logos focuses on logical reasoning and evidence. Ethos relates to the speaker's ethical appeal and credibility. Finally, rhetoric is the overall art of using these elements effectively to persuade. Together, they provide a comprehensive framework for creating powerful and convincing speeches or written arguments.

26. (A) Two-sided message
A two-sided message is highly effective for audiences who are already well-informed or potentially hostile to the speaker's position. By acknowledging and then refuting opposing viewpoints, the communicator appears more

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73. Persuasion via the "central route" usually results in:
(A) Temporary and unstable change in perception.
(B) No measurable change in the receiver's attitude.
(C) Enduring and stable attitude change over time.
(D) Change based exclusively on superficial source cues.

74. Which of the following is an example of formal communication?
(A) An annual performance appraisal meeting.
(B) A quick lunch break chat with a peer.
(C) Rumors spread casually in the cafeteria.
(D) An anonymous tip regarding office culture.

75. Match List-I with List-II and select the correct answer using the codes given below:
List-I: (Persuasion Determinants)
P. Source Credibility
Q. Source Attractiveness
R. Message Content
S. Audience Characteristics
List-II: (Examples)
1. Use of a celebrity in an ad
2. Intelligence level of the listener
3. A doctor giving medical advice
4. Use of fear appeals
Codes:
(A) P-3, Q-1, R-4, S-2
(B) P-1, Q-2, R-3, S-4
(C) P-4, Q-3, R-2, S-1
(D) P-2, Q-4, R-1, S-3

76. In the Osgood-Schramm model, the function of "interpreting" is performed by:
(A) Only the individual acting as the sender.
(B) Both the sender and the receiver of messages.
(C) Only the individual acting as the receiver.
(D) Neither the sender nor the receiver of messages.

77. Which of the following is NOT a type of non-verbal communication?
(A) Gestures
(B) Eye contact
(C) Written memorandum
(D) Body language

78. Which theory suggests that exposing people to a weak argument against their belief can help them resist stronger future attacks?
(A) Reactance Theory
(B) Elaboration Likelihood Model
(C) Cognitive Dissonance Theory
(D) Inoculation Theory

79. The term "message" in communication refers to:
(A) The encoded information being sent
(B) The physical background
(C) The noise in the channel
(D) The person receiving the info

80. Consider the following statements regarding barriers to communication:
1. Physical barriers can be overcome by better technology.
2. Semantic barriers arise due to different meanings of words.
3. Psychological barriers are always external to the receiver.
Which of the above statement(s) is/are correct?
(A) 1 and 2 only
(B) 2 and 3 only
(C) 1 and 3 only
(D) 1, 2, and 3

81. "Pathos" in Aristotle's rhetoric is used to:
(A) Build the speaker's credibility
(B) Appeal to the audience's emotions
(C) Provide statistical evidence
(D) Organize the speech chronologically

82. Source "trustworthiness" refers to:
(A) The perceived honesty and lack of bias of the source.
(B) The total financial assets or wealth held by the source.
(C) The physical beauty or aesthetic appeal of the source.
(D) The source's ability to use highly complex language patterns.

83. Which route of persuasion is used when a person buys a product just because their favorite actor endorses it?
(A) Central route
(B) Systematic route
(C) Peripheral route

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35. (A) Both A and R are true and R is the correct explanation of A.
Non-verbal communication is often considered more powerful than verbal messages because cues like facial expressions and body language are perceived as more spontaneous. Since these signals are harder to consciously fake, receivers tend to trust them more when they contradict spoken words. This high perceived authenticity makes non-verbal behavior a primary source of information for interpreting the true emotions and intentions of others.

36. (D) Physical barrier
Physical barriers are environmental or situational factors that obstruct the effective transmission of a message. These include loud background noise, long geographic distances, or physical objects like walls that separate the sender from the receiver. Such obstacles interfere with the clarity of the signal, making it difficult for the communication to occur smoothly and requiring strategies to minimize environmental interference for successful interaction.

37. (C) Informal communication
The "Grapevine" refers to the informal communication network that exists within every organization. It operates outside of official channels and hierarchies, carrying rumors, news, and social information through personal connections. While often faster than formal methods, the grapevine can also spread inaccurate information. However, it remains a vital part of organizational life, helping employees build relationships and navigate the social environment.

38. (B) The audience is large, heterogeneous, and generally anonymous.
Mass communication is distinguished by its ability to reach a large, diverse, and geographically dispersed audience simultaneously. Unlike interpersonal communication, which involves direct and personal interaction, mass communication is typically mediated through technology and involves an anonymous relationship between the sender and the receivers. This scale results in delayed or indirect feedback, making the process fundamentally different from small-group or one-on-one exchanges.

39. (D) Physical — Emotional distress
Emotional distress is categorized as a psychological barrier because it relates to the internal mental state of the individual. Physical barriers, on the other hand, involve external environmental factors such as walls or distance. In contrast, semantic barriers involve language issues like jargon, and psychological barriers involve personal biases or moods. Therefore, linking emotional distress to physical barriers is an incorrect pairing of communication obstacles.

40. (A) P-2, Q-1, R-4, S-3
Various proponents are associated with fundamental communication models. Berlo developed the SMCR Model, while Shannon and Weaver created the Mathematical Model. Lasswell is known for the formula "Who says what," which focuses on the components of mass communication. Finally, Osgood and Schramm introduced the Circular Model. These theories provide different frameworks for understanding how information is transmitted, processed, and interpreted.

41. (C) It is continuously interpreted and re-interpreted by both parties.
In the Osgood-Schramm model, the message is part of a continuous cycle of interpretation. Both the sender and the receiver act as active participants who constantly process, encode, and decode information. This model rejects the idea of a simple, one-time transfer, suggesting instead that meaning is dynamic and evolves as each party responds to and re-interprets the signals received from the other.

42. (A) The receiver is using the peripheral route.
Source attractiveness is most effective as a persuasive tool when the receiver is processing information via the peripheral route. In this state, the individual is not deeply analyzing the logical content of the message but is instead influenced by superficial cues. A physically attractive or likable speaker can trigger positive feelings that lead to acceptance of the message without the need for rigorous cognitive effort.

43. (D) The level of intelligence of the receiver
The level of intelligence is a critical audience characteristic that influences how a message is received and processed. More intelligent

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individuals may require stronger logical evidence and are often more capable of detecting flaws in an argument. Understanding the cognitive capacity of the audience allows the communicator to tailor the complexity and structure of the message to ensure it is both understandable and persuasive.

44. (B) The audience already agrees with the sender's position.
A one-sided message is most effective when the audience is already predisposed to agree with the sender's viewpoint. In such cases, presenting only supporting arguments reinforces existing beliefs and increases commitment without creating unnecessary confusion. However, if the audience is well-educated or likely to encounter opposing views, a two-sided approach is generally better for maintaining credibility and ensuring long-term resistance to counter-persuasion.

45. (B) 2 and 3 only
Persuasion is a neutral tool that requires the receiver's mental processing to evaluate arguments or cues. When successful, it can lead to long-term changes in behavior and attitudes. It is not inherently unethical; its morality depends on the intent of the communicator and the truthfulness of the information. Therefore, while it involves cognitive effort and can cause lasting change, it is not always negative.

46. (D) Feedback
The original Shannon-Weaver model, developed for technical communication, included components like the source, transmitter, channel, receiver, and noise. However, it did not initially emphasize feedback as a core element. Feedback was later integrated into more interactive models to represent the circular nature of human communication. The primary focus of this model was the accurate transmission of signals from one point to another.

47. (A) Movements of hands and body to express an idea.
Gestures are a form of non-verbal communication involving physical movements of the hands, arms, or body to convey specific meanings or emphasize spoken words. They can range from simple signs, like waving hello, to complex movements used during a speech. Gestures help clarify the sender's intent and provide visual reinforcement for verbal messages, making the overall communication more expressive and easier to understand.

48. (B) Preconceived notions and biases
Psychological barriers are internal mental factors that interfere with the effective exchange of information. These include preconceived notions, biases, prejudice, and strong emotions like anger or fear. Such factors create a mental filter that can cause the receiver to misinterpret or ignore the message. Overcoming these barriers requires self-awareness and an open-minded approach to ensure that the intended meaning is accurately received.

49. (B) Central route
The central route of the Elaboration Likelihood Model leads to attitude changes that are significantly more enduring and resistant to counter-persuasion. This is because the change is based on a thorough and systematic evaluation of the message's core arguments. Because the receiver has invested significant cognitive effort into processing the information, the resulting beliefs are more deeply integrated and stable over time.

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50. (A) Both A and R are true and R is the correct explanation of A.
In mass communication, feedback is typically delayed or indirect because the audience is large and geographically dispersed. Unlike face-to-face interactions where responses are immediate, mass media senders often rely on indicators like ratings, sales, or social media trends to gauge audience reaction. The vast distance and anonymity between the source and the heterogeneous audience make direct, real-time feedback loops difficult to achieve.

51. (C) Information flows from sender to receiver without a response.
One-way communication is characterized by a linear flow of information where the sender provides a message and the receiver does not provide a formal response or feedback. This method is often used for delivering quick directives, mass announcements, or public broadcasts. While efficient for speed, it lacks the interactive component needed to ensure the

receiver has correctly interpreted the information or to clarify doubts.

52. (D) Body movements and facial expressions
Kinesics is the scientific study of body movements, facial expressions, and gestures as a form of non-verbal communication. It examines how different postures, eye movements, and physical actions convey messages about a person's emotions, attitudes, and intentions. By observing these cues, communicators can gain a deeper understanding of the unspoken aspects of an interaction, as body language often reveals more than words alone.

53. (C) Use of specialized technical terms with a layperson.
A semantic barrier arises when the language used by the sender is not understood by the receiver. An example is the use of specialized technical jargon when speaking to someone outside the field. Because the parties do not share a common understanding of the specific terms, the message's meaning is lost or distorted. Effective communication requires using language that is appropriate for the receiver's knowledge level.

54. (B) Evidence and logic
In Aristotle's rhetorical framework, logos refers to the use of logical reasoning, evidence, and factual data to support an argument. It appeals to the audience's intellect by providing a rational basis for the speaker's claims. By using clear structure, statistics, and sound deduction, a communicator can build a convincing case that stands up to critical scrutiny, making the persuasive attempt more effective.

55. (A) P-2, Q-4, R-3, S-1
Different types of non-verbal communication involve various physical behaviors. Proxemics relates to spatial distance, such as sitting distance. Paralanguage involves vocal characteristics like speaking slowly. Kinesics covers body movements like shrugging shoulders. Finally, haptics refers to the use of touch, exemplified by a handshake. Together, these categories explain how meaning is conveyed through non-verbal channels during human interactions and social exchanges.

56. (A) Motivate people to adopt preventive health behaviors.
In health communication, fear appeals are used to highlight the negative consequences of certain behaviors, such as smoking or poor diet. The goal is to create a sufficient level of concern that motivates individuals to adopt healthier, preventive actions. To be effective, these messages must also provide clear and achievable steps that the audience can take to reduce the risk and protect their well-being.

57. (C) Shannon-Weaver Model
The Shannon-Weaver Model was the first to formally introduce and emphasize the concept of "noise" in the communication process. Originally designed to improve technical signal transmission, it identified noise as any interference that distorts the message as it travels from the source to the receiver. This inclusion recognized that environmental or technical factors can significantly degrade the quality and accuracy of the information being sent.

58. (A) The Grapevine
Informal communication within an organization is frequently referred to as the "Grapevine." This unofficial network carries information through social relationships rather than formal hierarchies. It is characterized by its speed and ability to spread both rumors and useful office news. While it is not part of the official chain of command, managers often monitor it to understand employee morale and the informal culture of the workplace.

59. (D) Likely to be exposed to opposing viewpoints.
A two-sided message is particularly effective when the audience is likely to encounter conflicting information in the future. By presenting and refuting opposing arguments, the speaker prepares the audience to resist counter-persuasion. this "inoculation" effect makes the original message more durable. It is a strategic choice for communicators who want to maintain their influence in a competitive or information-heavy environment.

60. (A) 1 and 2 only
Non-verbal communication is a powerful tool that can contradict spoken words, often revealing a person's true feelings. It is also highly culturally

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presentation of risks with messages that respect the individual's sense of agency.

94. (D) Proxemics refers to the study of body language.
This statement is incorrect because proxemics is actually the study of how people use personal space and distance in communication. The study of body language, including gestures and facial expressions, is known as kinesics. Verbal communication does indeed include oral and written forms, and feedback is essential for reducing gaps in understanding. Additionally, the sender is always the one responsible for encoding the message into symbols for transmission.

95. (A) Ability to read, write, and speak effectively.
In Berlo's SMCR model, the "Communication Skills" of the sender refer to their fundamental abilities to read, write, speak, and listen effectively. These skills determine how well the source can encode their thoughts into a clear and understandable message. A sender with strong communication skills is more likely to choose the right words and symbols, ensuring that the intended meaning is successfully conveyed to the receiver without distortion.

96. (B) Providing speed and simple directions to a group.
One-way communication is most efficient in situations where speed is a priority and the message is simple, such as providing directions to a large group. Because it does not require a feedback loop, information can be disseminated quickly. While it is not ideal for building relationships or solving complex problems, it is an effective tool for emergency announcements or straightforward organizational directives where immediate interaction is not necessary for success.

97. (B) Address common misconceptions and effectively refute them.
Public health campaigns use two-sided messages to enhance credibility by acknowledging common misconceptions or opposing viewpoints before refuting them with scientific facts. this approach is more persuasive for skeptical or well-informed audiences. By showing that they have considered alternative views, health communicators can build trust and effectively "inoculate" the public against future misinformation, leading to more robust and lasting changes in health behaviors and attitudes.

98. (A) Source
The "S" in Berlo's SMCR model stands for "Source," which represents the person or organization that originates the message. The characteristics of the source, such as their knowledge, attitudes, and communication skills, are critical to the success of the interaction. This model highlights how the sender's own background and abilities shape the way information is encoded and delivered, ultimately affecting how it will be received and interpreted.

99. (C) Emblems
Emblems are a specific type of non-verbal gesture that has a direct and well-known verbal translation within a particular culture. Examples include a "thumbs up" for approval or a "peace sign." Because these gestures can stand alone and be understood without accompanying speech, they are highly effective for quick communication. However, their meaning can vary significantly between different cultures, requiring awareness to avoid misunderstandings during international or cross-cultural interactions.

100. (D) High levels of anxiety or stress in the receiver.
Psychological barriers refer to internal mental or emotional states that hinder the effective transmission or reception of information. High levels of anxiety, stress, or emotional distress can distort how a message is interpreted. These internal factors create a cognitive filter that prevents the receiver from processing the sender's intended meaning clearly, regardless of the physical environment or the quality of the communication channel being used.

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69. (C) The receiver's cognitive capacity and lack of distractions.
In the Elaboration Likelihood Model, "ability" refers to the receiver's cognitive capacity and situational factors that allow them to process the message. This includes their prior knowledge of the topic, the amount of time available, and the absence of environmental distractions. If a receiver lacks the ability to process complex information, they are more likely to rely on peripheral cues rather than deep logical analysis.

70. (A) 3-2-1-4
Lasswell's model follows a specific logical sequence: Who (sender), says what (message), in which channel (medium), to whom (audience), and with what effect (impact). This linear framework is used to analyze the components of mass communication. By following this order, researchers can systematically examine each element of the process to understand how information is distributed and what influence it has on the targeted population.

71. (D) Psychological prejudice
Psychological prejudice acts as a significant barrier to effective communication by creating a mental bias that distorts the reception of a message. When a receiver has preconceived negative notions about the sender or the topic, they may ignore facts or misinterpret information to fit their existing beliefs. Overcoming such internal barriers requires active effort to maintain objectivity and a willingness to listen without immediate judgment.

72. (A) Tone and pitch of voice
Paralanguage is a category of non-verbal communication that focuses on vocal elements rather than the actual words spoken. This includes the tone, pitch, volume, and speed of the speaker's voice. These cues provide essential information about the speaker's emotional state and emphasis. For instance, a high pitch might signal excitement or nervousness, while a firm tone can convey authority, significantly affecting the message's impact.

73. (C) Enduring and stable attitude change over time.
Persuasion through the central route requires the audience to engage in deep cognitive processing of the message's arguments. Because this change results from active mental effort and logical evaluation, the resulting attitudes are typically more enduring and stable. Such changes are also more predictive of future behavior and are harder to overturn with counter-arguments, making the central route ideal for creating lasting influence.

74. (A) An annual performance appraisal meeting.
An annual performance appraisal meeting is a classic example of formal communication within an organization. It follows established professional procedures, involves official documentation, and occurs within the recognized hierarchical structure. This type of interaction is designed to provide clear, authoritative feedback on an employee's work, ensuring that organizational goals are met and that the communication remains structured, objective, and recorded for future reference.

75. (A) P-3, Q-1, R-4, S-2
Various factors determine the success of persuasion. Source credibility is exemplified by a doctor giving medical advice, while source attractiveness is used when a celebrity endorses a product. Message content can include strategies like fear appeals. Finally, audience characteristics involve the internal traits of the listener, such as their intelligence level. Each of these elements plays a specific role in how a persuasive message is processed.

76. (B) Both the sender and the receiver of messages.
In the Osgood-Schramm circular model, interpreting is a shared function performed by both the sender and the receiver. As the interaction progresses, each party constantly decodes incoming signals and encodes new messages based on their interpretation. This continuous, reciprocal process of meaning-making emphasizes that communication is not a simple transfer but an ongoing dialogue where both participants are active in processing and creating shared understanding.

77. (C) Written memorandum
A written memorandum is a form of verbal communication because it relies on words and language to convey meaning. Non-verbal communication, in contrast, involves cues that do not use words, such as gestures, eye

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group norms

27. When an individual uses a professional association of doctors to evaluate their own performance and standards, that association acts as a:
(A) Primary group
(B) Out-group
(C) Informal group
(D) Reference group

28. Match the items in List I with the corresponding items in List II:
List I: (Group Type)
P. In-group
Q. Out-group
R. Reference group
S. Secondary group
List II: (Definition)
1. Group used for self-comparison
2. "We-group" characterized by loyalty
3. "They-group" perceived as different
4. Formal, impersonal group
(A) P-2, Q-1, R-3, S-4
(B) P-2, Q-3, R-1, S-4
(C) P-3, Q-2, R-1, S-4
(D) P-1, Q-3, R-2, S-4

29. What is the defining feature of Asch's experiment in social psychology?
(A) Obedience to authority
(B) Helping behavior in emergencies
(C) Conformity to group pressure
(D) Task performance in the presence of others

30. In Milgram's experiment, what was the primary factor being studied?
(A) Group peer pressure
(B) Cognitive dissonance
(C) Group polarization
(D) Obedience to authority

31. Which of the following is a correct statement regarding the Bystander Effect?
(A) The presence of others leads to a diffusion of responsibility.
(B) People are more likely to help when others are observing them.
(C) It was first demonstrated in a study by scholar Solomon Asch.
(D) Helping behavior increases with the total number of witnesses.

32. Consider the following statements regarding Robert Zajonc's theory of Social Facilitation:
1. Presence of others increases physiological arousal.
2. Arousal enhances the performance of well-learned tasks.
3. Arousal enhances the performance of complex or new tasks.
Which of the above statement(s) is/are correct?
(A) 1 and 2 only
(B) 2 and 3 only
(C) 1 and 3 only
(D) 1, 2, and 3

33. Identify the INCORRECT statement regarding Groupthink.
(A) It is characterized by a high degree of group cohesiveness.
(B) It involves a critical evaluation of all alternative viewpoints.
(C) It leads to an illusion of invulnerability.
(D) It is often driven by a desire for harmony within the group.

34. Which factor is most likely to reduce social loafing in a group task?
(A) Making individual contributions identifiable
(B) Increasing the total number of group members
(C) Keeping the task simple and unchallenging
(D) Encouraging anonymity among members

35. The following question consists of two statements—Assertion (A) and Reason (R). Select the correct answer using the codes given below.
Assertion (A): Proximity is a significant factor in interpersonal attraction.
Reason (R): Frequent contact through physical closeness increases the likelihood of interaction and liking.
(A) Both A and R are true and R is the correct explanation of A.
(B) Both A and R are true but R is not the correct explanation of A.
(C) A is true but R is false.
(D) A is false but R is true.

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encounter more significant persuasive challenges later.

86. (B) Is often ideologically driven and highly one-sided.
Propaganda differs from general persuasion by its often ideologically driven and highly one-sided nature. It frequently uses emotional manipulation and may present biased or incomplete information to serve the interests of a specific group or cause. While general persuasion can be balanced and ethical, propaganda is typically a deliberate attempt to control public perception and behavior by limiting the audience's exposure to alternative viewpoints.

87. (D) Poor lighting in a room
Poor lighting is a physical barrier to communication because it is an environmental factor that can interfere with the reception of non-verbal cues. If the receiver cannot see the sender's facial expressions or gestures clearly, a significant part of the message may be lost. Unlike psychological or semantic barriers, which are internal or linguistic, physical barriers are external obstacles that physically hinder the clarity of the interaction.

88. (A) Effective learning and collaborative problem solving.
Two-way communication is essential for effective learning and collaborative problem-solving because it allows for the active exchange of ideas. Through feedback, participants can clarify complex concepts, correct misunderstandings, and build upon each other's contributions. This interactive process ensures that everyone involved has a shared understanding of the goals and information, which is critical for successful group work and deep intellectual engagement.

89. (C) The receiver's interest and involvement in the topic.
In the Elaboration Likelihood Model, "motivation" refers to the receiver's level of personal interest and involvement in the message's topic. When a person perceives the information as highly relevant to their own life, they are more motivated to engage in deep, central-route processing. Conversely, if they have little interest in the subject, they are more likely to rely on simple peripheral cues to form an opinion.

90. (A) Chronemics
Chronemics is the study of how time is used in non-verbal communication. It examines how our use of time—such as punctuality, the amount of time spent in an interaction, or the speed of a response—conveys messages about status, urgency, or interest. For example, being late to a meeting can signal a lack of respect, while responding quickly to a message can show high levels of engagement.

91. (D) Circular/Interactive models
The concept of feedback was formally emphasized in circular and interactive models of communication. These models moved away from linear descriptions, recognizing that communication is a two-way process. Feedback allows the sender to know if the message was received and understood, enabling a continuous loop of interaction. This addition was crucial for accurately representing human communication, where participants are constantly responding to and adjusting their messages based on each other's reactions.

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92. (B) Is perceived as an expert with no hidden agenda.
Source credibility is maximized when the audience perceives the speaker as both an expert on the subject and as having no hidden personal agenda. This combination of expertise and trustworthiness makes the communicator's message highly persuasive. When the audience feels that the information is being provided by a knowledgeable source who is acting in an unbiased manner, they are significantly more likely to accept and act upon the advice.

93. (C) The audience feels their autonomy is being limited.
Reactance theory suggests that "scare tactics" can backfire if the audience perceives them as an attempt to limit their personal autonomy or freedom of choice. When people feel pressured by aggressive health messages, they may react by rejecting the advice or continuing the unhealthy behavior to assert their independence. To be effective, health campaigns must balance the

specific, meaning gestures and expressions can have different interpretations across the globe. However, it does not include written text, which is considered a form of verbal communication. Understanding these nuances is essential for effective cross-cultural and interpersonal interaction and accurate interpretation.

61. (C) Communication between a few people with high feedback.
Interpersonal communication is best described as the exchange of information between a small number of people, such as two or three individuals. It is characterized by high levels of direct interaction and immediate feedback. This allows participants to clarify meanings, adjust their messages in real-time, and build personal relationships. It utilizes both verbal and non-verbal cues to ensure a deep and mutual understanding.

62. (D) Persuasion involves the use of psychological influence rather than force.
Persuasion is distinct from coercion because it relies on psychological influence, reasoning, and emotional appeal to change a person's mind or behavior. It respects the receiver's autonomy and freedom of choice. In contrast, coercion uses force or threats to compel action. Furthermore, propaganda is often biased rather than objective, and encoding is the responsibility of the sender, not the receiver, in the communication process.

63. (A) Reactance Theory
Reactance Theory explains the psychological resistance that occurs when individuals feel their freedom of choice is being threatened or restricted. When people feel pressured to adopt a certain view or behavior, they may respond by doing the exact opposite to assert their independence. This defensive reaction highlights why aggressive or overly controlling persuasive tactics often backfire, leading to a result contrary to the communicator's intent.

64. (B) The originator of the message
In Berlo's SMCR model, the "source" refers to the originator or sender of the message. This is the person or entity that initiates the communication process by encoding thoughts into a message. The effectiveness of the source depends on their communication skills, knowledge, attitudes, and the social-cultural context in which they operate, all of which influence how the message is constructed and delivered.

65. (A) Both A and R are true and R is the correct explanation of A.
Source expertise is a major determinant of persuasive success because receivers are more likely to accept a message from someone they believe is knowledgeable. When a speaker is perceived as an expert on a topic, their arguments carry more weight and are viewed as more credible. This perception reduces the audience's skepticism and increases the likelihood that they will be influenced by the information provided.

66. (A) Mass communication
Mass communication is the most effective tool for mobilizing large populations during public health crises. It utilizes media such as television, radio, and digital platforms to reach thousands or millions of people simultaneously. By delivering consistent and authoritative messages quickly, mass communication can inform the public about safety measures, encourage healthy behaviors, and coordinate large-scale responses across broad and diverse geographic areas.

67. (C) Shannon & Weaver — Circular Model
The Shannon-Weaver model is fundamentally linear rather than circular, as it focuses on the technical transmission of a message from a source to a receiver through a channel. It famously introduced the concept of noise but lacked a robust feedback loop. In contrast, the Osgood-Schramm model is well-known for emphasizing the circular and interactive nature of human communication, where both parties act as encoders and decoders.

68. (D) Decodes the message
The receiver in the communication process is the individual or group for whom the message is intended. Their primary role is to decode the incoming signals, which involves interpreting and assigning meaning to the symbols, words, or gestures sent by the source. Successful communication depends on the receiver's ability to accurately translate the encoded message back into thoughts that align with the sender's original intent.

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CHAPTER 25

Social Interaction and Interpersonal Attraction

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1. Which term refers to the process by which individuals act and react in relation to others, forming the basic unit of social life?
(A) Social stratification
(B) Social interaction
(C) Social mobility
(D) Social organization

2. According to the nature of social interaction, which element is essential for an action to be considered "social" as per Max Weber?
(A) Subjective meaning attached by actors
(B) Physical presence of other individuals
(C) Legally binding or formal contracts
(D) Economic exchange of material goods

3. Which of the following is a correct statement regarding cooperation as a type of social interaction?
(A) It is always based on deep and personal emotional ties.
(B) It is a dissociative process found in modern society.
(C) It involves working together toward a common goal.
(D) It requires the total elimination of all self-interest.

4. Identify the INCORRECT statement regarding competition.
(A) It is usually a continuous and ongoing process in society.
(B) It is often impersonal and directed toward specific goals.
(C) It is regulated by established social norms and rules.
(D) It involves a direct physical struggle to destroy the opponent.

5. The following question consists of two statements—Assertion (A) and Reason (R). Select the correct answer using the codes given below.
Assertion (A): Accommodation is a process of adjustment to overcome conflict.
Reason (R): It allows individuals or groups with different interests to function together without total assimilation.
(A) Both A and R are true and R is the correct explanation of A.
(B) Both A and R are true but R is not the correct explanation of A.
(C) A is true but R is false.
(D) A is false but R is true.

6. Which of the following pairs is INCORRECTLY MATCHED?
(A) Competition — Impersonal struggle
(B) Conflict — Goal-oriented with rules
(C) Cooperation — Mutual aid
(D) Assimilation — Cultural fusion

7. In the context of social interaction, what is the best description of "conflict"?
(A) A peaceful negotiation between two opposing parties
(B) The automatic alignment of personal and group goals
(C) The voluntary merging of two distinct cultural groups
(D) A process of seeking rewards by eliminating rivals

8. Match the items in List I with the corresponding items in List II:
List I: (Type of Interaction)
P. Cooperation
Q. Conflict
R. Accommodation
S. Assimilation
List II: (Characteristic)
1. Temporary truce or adjustment

2. Permanent fusion of distinct groups
3. Direct and conscious struggle
4. Joint effort for a shared objective

(A) P-4, Q-3, R-1, S-2
(B) P-4, Q-1, R-3, S-2
(C) P-1, Q-3, R-4, S-2
(D) P-2, Q-3, R-1, S-4

9. A student participates in a debate competition where the primary focus is winning the trophy rather than attacking the opponent's character. This is an example of:
(A) Conflict
(B) Assimilation
(C) Competition
(D) Cooperation

10. Read the following statements and select the correct option.
Statement I: Social interaction can be both associative and dissociative.
Statement II: Dissociative processes like conflict always lead to the total destruction of society.
(A) Both statements are correct.
(B) Statement I is correct, but Statement II is incorrect.
(C) Statement I is incorrect, but Statement II is correct.
(D) Both statements are incorrect.

11. Which of the following is NOT considered a dissociative social process?
(A) Competition
(B) Conflict
(C) Contravention
(D) Accommodation

12. Consider the following statements regarding Social Exchange Theory by Homans:
1. Interaction is based on a calculation of rewards and costs.
2. People seek to maximize their profits in social relationships.
3. Emotional altruism is the sole driver of all human interactions.

Which of the above statement(s) is/are correct?
(A) 1 and 2 only
(B) 2 and 3 only
(C) 1 and 3 only
(D) 1, 2, and 3

13. A person decides to stay in a friendship because the emotional support received outweighs the occasional effort required to listen to the friend's problems. This applies to:
(A) Symbolic Interactionism
(B) Role Theory
(C) Social Exchange Theory
(D) Group Dynamics

14. According to Thibaut and Kelley, what determines the stability of a relationship?
(A) The absolute level of rewards
(B) The physical distance between actors
(C) The biological similarity of actors
(D) The comparison level for alternatives

15. The following question consists of two statements—Assertion (A) and Reason (R). Select the correct answer using the codes given below.
Assertion (A): Herbert Blumer coined the term "Symbolic Interactionism."
Reason (R): He emphasized that human beings act toward things based on the meanings those things have for them.
(A) Both A and R are true and R is the correct explanation of A.
(B) Both A and R are true but R is not the correct explanation of A.
(C) A is true but R is false.
(D) A is false but R is true.

16. George Herbert Mead's concept of the "Generalized Other" refers to:
(A) The specific influence of a child's own parents.
(B) The internalized attitudes of the whole community.
(C) The biological impulses driving individual behavior.
(D) A person who actively opposes an individual's goal.

17. Which of the following is a correct statement about Mead's "I" and "Me"?
(A) The "I" is the socialized, conventional aspect of the self.
(B) The "I" is the active responder to the "Me".
(C) The "Me" is the creative and spontaneous aspect of the self.
(D) The "Me" is entirely biological and lacks

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social influence.

18. Match the items in List I with the corresponding items in List II:
List I: (Theorist)
P. George Herbert Mead
Q. Erving Goffman
R. George Homans
S. Muzafer Sherif
List II: (Core Concept)
1. Dramaturgy
2. Distributive Justice
3. Taking the role of the other
4. Realistic Conflict Theory
(A) P-3, Q-1, R-2, S-4
(B) P-3, Q-2, R-1, S-4
(C) P-1, Q-3, R-2, S-4
(D) P-4, Q-1, R-2, S-3

19. Which of the following is an INCORRECT statement regarding Role Theory?
(A) Roles are the behavioral expectations associated with a status.
(B) Roles provide a script for social interaction.
(C) An individual occupies only one role throughout their life.
(D) Role performance may differ from role expectation.

20. What is the most appropriate term for the situation where a working mother finds it difficult to balance the demands of her job and the needs of her children?
(A) Role strain
(B) Role distance
(C) Role exit
(D) Role conflict

21. Which of the following pairs is INCORRECTLY MATCHED regarding status?
(A) Ascribed status — Assigned at birth
(B) Achieved status — Based on merit
(C) Master status — Least important identity
(D) Status set — All statuses held by a person

22. Consider the following statements regarding Role Conflict:
1. It occurs between two or more different roles held by a person.
2. It can be resolved through role prioritization.
3. It is identical to role strain, which occurs within a single role.
Which of the above statement(s) is/are correct?
(A) 1 and 2 only
(B) 1 and 3 only
(C) 2 and 3 only
(D) 1, 2, and 3

23. A police officer has to arrest his own brother for a crime. This situation is a classic example of:
(A) Role strain
(B) Role taking
(C) Role playing
(D) Role conflict

24. Read the following statements and select the correct option.
Statement I: Status refers to a position in a social system.
Statement II: Role refers to the dynamic or behavioral aspect of status.
(A) Both statements are correct.
(B) Statement I is correct, but Statement II is incorrect.
(C) Statement I is incorrect, but Statement II is correct.
(D) Both statements are incorrect.

25. The following question consists of two statements—Assertion (A) and Reason (R). Select the correct answer using the codes given below.
Assertion (A): Social loafing is more likely to occur in large groups than in small groups.
Reason (R): Individual accountability decreases as group size increases.
(A) Both A and R are true and R is the correct explanation of A.
(B) Both A and R are true but R is not the correct explanation of A.
(C) A is true but R is false.
(D) A is false but R is true.

26. Which of the following is NOT a characteristic of Group Dynamics?
(A) Static and unchanging nature of group relations
(B) High degree of interdependence between members
(C) Influence of the group on specific individual behavior
(D) Formation and maintenance of distinct

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contact, and body language. While a memo is a formal document, it is fundamentally linguistic. Understanding this distinction is important for categorizing different communication methods based on their primary mode of transmission.

78. (D) Inoculation Theory
Inoculation Theory posits that individuals can be made resistant to persuasive attacks by being exposed to weak versions of opposing arguments. When people are given these "small doses" of counter-arguments along with effective refutations, they develop mental defenses. This process prepares them to maintain their original beliefs when they later face much stronger or more aggressive attempts to change their minds, effectively "immunizing" them against persuasion.

79. (A) The encoded information being sent
In the communication process, the "message" refers to the specific information, ideas, or feelings that have been encoded by the sender for transmission. It consists of the symbols, words, or gestures used to convey meaning. The message is the core content of the interaction, and its success depends on how clearly it is structured and how well it aligns with the receiver's ability to decode it.

80. (A) 1 and 2 only
Physical barriers, such as distance or noise, can often be mitigated through improved technology like better microphones or digital platforms. Semantic barriers are caused by language differences or the varied meanings of words. However, psychological barriers are internal to the receiver or sender, involving personal biases and emotions. Therefore, stating that psychological barriers are always external is incorrect, as they reside within the individual's mental state.

81. (B) Appeal to the audience's emotions
Pathos is one of Aristotle's three pillars of rhetoric, focusing on the use of emotional appeals to persuade an audience. By tapping into feelings such as sympathy, anger, fear, or joy, a communicator can create a stronger personal connection with listeners. When an audience is emotionally engaged, they are often more receptive to the speaker's message, as emotions can powerfully influence decision-making and the adoption of new beliefs.

82. (A) The perceived honesty and lack of bias of the source.
Trustworthiness is a core component of source credibility and refers to the audience's perception of the speaker's honesty, sincerity, and lack of hidden agendas. If the source is seen as unbiased and truthful, the audience is far more likely to accept the message. Trust is built over time through consistent and transparent communication, making it a vital asset for any individual or organization seeking to influence others.

83. (C) Peripheral route
Buying a product solely because of a celebrity endorsement is a classic example of using the peripheral route to persuasion. In this scenario, the consumer is not analyzing the product's features or quality through logical reasoning. Instead, they are influenced by an external cue—the attractiveness or fame of the source. This type of influence is often rapid but may not lead to long-term brand loyalty compared to central processing.

84. (D) The effects and components of mass communication.
Lasswell's model is primarily focused on the study of mass communication and its societal effects. It provides a framework for analyzing "Who" says "What," through "Which channel," to "Whom," and with "What effect." By breaking down the process into these five components, researchers can evaluate how media messages are constructed, distributed, and the impact they have on public opinion and collective behavior.

85. (A) Both A and R are true and R is the correct explanation of A.
Inoculation theory is frequently compared to a medical vaccine because it builds resistance to "infection" by persuasive messages. Just as a vaccine uses a weakened pathogen to stimulate the immune system, this theory uses weakened counter-arguments to stimulate the mind's defensive reasoning. By practicing how to refute these smaller threats, individuals become better equipped to defend their beliefs when they

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36. Which of the following pairs is INCORRECTLY MATCHED?
(A) Similarity — "Birds of a feather flock together"
(B) Complementarity — "Opposites attract"
(C) Reciprocity — Liking those who like us
(D) Proximity — Liking those who are physically distant

37. If a person chooses a partner because the partner's personality traits balance their own weaknesses, which factor of attraction is at work?
(A) Similarity
(B) Proximity
(C) Complementarity
(D) Reciprocity

38. Match the items in List I with the corresponding items in List II:
List I: (Factor of Attraction)
P. Similarity
Q. Physical Attractiveness
R. Reciprocity
S. Proximity
List II: (Description)
1. "Halo effect" regarding beautiful people
2. Geographical nearness
3. Matching in attitudes and values
4. Mutual liking
(A) P-3, Q-4, R-1, S-2
(B) P-3, Q-1, R-4, S-2
(C) P-1, Q-3, R-4, S-2
(D) P-2, Q-1, R-4, S-3

39. Read the following statements and select the correct option.
Statement I: Reinforcement theory suggests we like those whose behavior is rewarding to us.
Statement II: Social Exchange theory posits that we only maintain relationships that are costly.
(A) Both statements are correct.
(B) Statement I is correct, but Statement II is incorrect.
(C) Statement I is incorrect, but Statement II is correct.
(D) Both statements are incorrect.

40. Which of the following is NOT one of the three components in Sternberg's Triangular Theory of Love?
(A) Compatibility
(B) Intimacy
(C) Passion
(D) Commitment

41. A couple has been together for 20 years. They share deep secrets and are committed to staying together, but the physical passion has faded. According to Sternberg, this is:
(A) Romantic love
(B) Fatuous love
(C) Companionate love
(D) Consummate love

42. Consider the following statements regarding Sternberg's theory of love:
1. Intimacy
2. Passion
3. Commitment
Which of the above components are combined in "Consummate Love"?
(A) 1 and 2 only
(B) 1 and 3 only
(C) 2 and 3 only
(D) 1, 2, and 3

43. What is defined as the tendency for individuals to perform better on simple tasks when being observed by others?
(A) Social Loafing
(B) Groupthink
(C) Deindividuation
(D) Social Facilitation

44. Who conducted the famous experiment involving a "teacher" delivering electric shocks to a "learner" to study obedience?
(A) Solomon Asch
(B) Stanley Milgram
(C) Philip Zimbardo
(D) Bibb Latane

45. The following question consists of two statements—Assertion (A) and Reason (R). Select the correct answer using the codes given below.
Assertion (A): The bystander effect is partly caused by the "pluralistic ignorance" of the situation.
Reason (R): People look to others to see how to react; if no one else reacts, they assume there is

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10. (B) Statement I is correct, but Statement II is incorrect.
Social interaction includes associative processes like cooperation and dissociative processes like conflict. While conflict is a dissociative process, it does not always lead to the destruction of society; instead, it can lead to social change or the establishment of new norms. Therefore, the claim that conflict causes total societal destruction is sociologically false.

11. (D) Accommodation
Dissociative social processes include competition, conflict, and contravention, which tend to pull people apart or create opposition. In contrast, accommodation is an associative process because it involves adjustment and finding a way for people to function together despite their differences. It aims at achieving social harmony and stability rather than maintaining social division or struggle.

12. (A) 1 and 2 only
Social Exchange Theory, developed by George Homans, posits that social behavior is the result of an exchange process. Participants calculate the rewards and costs of interactions to maximize their personal profits. While altruism exists, the theory focuses on rational self-interest rather than emotional altruism as the primary driver for maintaining most social relationships and interactions.

13. (C) Social Exchange Theory
Social Exchange Theory suggests that individuals evaluate their relationships based on a subjective cost-benefit analysis. When a person stays in a friendship because the emotional support outweighs the effort required, they are exhibiting rational behavior focused on maximizing rewards. This perspective views social interactions as transactions where people seek to maintain a favorable balance of outcomes.

14. (D) The comparison level for alternatives
Thibaut and Kelley proposed that relationship stability depends on the comparison level for alternatives. This refers to an individual's assessment of whether the rewards in a current relationship are better than those available in other potential relationships. If a person believes they cannot find a better deal elsewhere, they are more likely to remain committed.

15. (A) Both A and R are true and R is the correct explanation of A.
Herbert Blumer coined the term Symbolic Interactionism to describe a framework focusing on how people create meaning through social interaction. He argued that human behavior is guided by the meanings that objects and actions hold for individuals. These meanings are derived from social communication and are modified through an interpretive process used during social encounters.

16. (B) The internalized attitudes of the whole community.
George Herbert Mead's concept of the generalized other represents the collection of roles and attitudes common to a whole social group. By internalizing these expectations, individuals can understand how to behave in a way that is acceptable to society. This process is crucial for the development of the self and for effective social participation and coordination.

17. (B) The "I" is the active responder to the "Me".
In Mead's theory of the self, the "I" represents the spontaneous, impulsive, and creative aspect of the individual. The "Me" is the socialized self that internalizes society's values and norms. The "I" acts as the responder to the "Me," reflecting the tension between individual agency and the expectations imposed by the social environment.

18. (A) P-3, Q-1, R-2, S-4
Social theorists are identified by their core contributions to the field. Mead is known for the concept of taking the role of the other, while Goffman developed dramaturgy. George Homans introduced distributive justice within social exchange theory, and Muzafer Sherif is famous for realistic conflict theory, which explains intergroup hostility over limited resources.

19. (C) An individual occupies only one role throughout their life.
Role theory explains that individuals hold multiple roles simultaneously, such as being a parent, employee, and citizen. Roles are dynamic and provide a set of expectations for behavior associated with a specific social status. Because

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55. A person starts dressing like the members of a popular music band they admire. In this case, the band serves as a:
(A) Primary group
(B) Out-group
(C) In-group
(D) Reference group

56. What is the definition of "reciprocity of liking"?
(A) Liking someone because they like us
(B) Liking someone because they are physically attractive
(C) Liking someone because they live nearby
(D) Liking someone because they are different from us

57. Which scholar is associated with the early study of "social loafing" through tug-of-war experiments?
(A) Solomon Asch
(B) Stanley Milgram
(C) Max Ringelmann
(D) Robert Zajonc

58. Which of the following is a correct statement regarding "Role Distance"?
(A) It is the act of detaching oneself from a role while performing it.
(B) It is synonymous with the psychological concept of role conflict.
(C) It refers to the physical distance maintained between social roles.
(D) It occurs only when a person decides to leave a role forever.

59. Identify the INCORRECT statement regarding "Assimilation."
(A) It is a slow and gradual process.
(B) It involves the merging of cultural identities.
(C) It leads to a unified cultural group.
(D) It is a dissociative social process.

60. Arrange the following steps of the Bystander Intervention Model by Latane and Darley in chronological order:
I. Interpreting the event as an emergency
II. Noticing the event
III. Deciding how to help
IV. Assuming responsibility
(A) II, I, IV, III
(B) I, II, III, IV
(C) II, IV, I, III
(D) IV, II, I, III

61. Which of the following is the most appropriate example of "Ascribed Status"?
(A) Being a licensed medical doctor
(B) Being a specialized college graduate
(C) Being born into a specific caste
(D) Being a champion professional athlete

62. Which of the following pairs is INCORRECTLY MATCHED?
(A) Mead — The Self
(B) Blumer — Meaning, Language, Thought
(C) Homans — Social Exchange
(D) Sternberg — Social Facilitation

63. In a workplace, two departments compete for a limited annual bonus. This represents:
(A) Competition
(B) Cooperation
(C) Assimilation
(D) Accommodation

64. Read the following statements and select the correct option.
Statement I: In-groups are groups to which we feel we belong.
Statement II: Out-groups are groups toward which we feel antagonism or competitiveness.
(A) Both statements are correct.
(B) Statement I is correct, but Statement II is incorrect.
(C) Statement I is incorrect, but Statement II is correct.
(D) Both statements are incorrect.

65. Which of the following is NOT an attraction factor mentioned in social psychology?
(A) Proximity
(B) Biological Predeterminism
(C) Physical Attractiveness
(D) Similarity

66. According to the Reinforcement-Affect Model, we are more likely to be attracted to someone if:
(A) We meet them in a pleasant environment.
(B) They criticize our performance or behavior.
(C) They are physically distant from our home.
(D) They disagree with our fundamental values.

67. What is "Status"?
(A) The specific behavior expected of a person

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group. The study highlighted the powerful impact of group consensus on individual judgment.

30. (D) Obedience to authority
Stanley Milgram's experiments were designed to measure the willingness of participants to obey an authority figure who instructed them to perform acts conflicting with their personal conscience. Participants were told to deliver electric shocks to a learner for incorrect answers. The results demonstrated that most individuals are surprisingly susceptible to authority, even when asked to cause harm.

31. (A) The presence of others leads to a diffusion of responsibility.
The bystander effect describes the phenomenon where individuals are less likely to offer help to a victim when other people are present. This occurs because the perceived responsibility to act is spread across the entire group, leading to a diffusion of responsibility. Contrary to intuition, the likelihood of receiving help actually decreases as the number of witnesses increases.

32. (A) 1 and 2 only
Robert Zajonc's theory of social facilitation states that the presence of others increases physiological arousal. This arousal strengthens the dominant response, which typically improves performance on simple or well-learned tasks. However, for complex or unfamiliar tasks, the dominant response is often incorrect, leading to impaired performance. Thus, the presence of others does not always enhance performance.

33. (B) It involves a critical evaluation of all alternative viewpoints.
Groupthink is a psychological phenomenon that occurs within highly cohesive groups where the desire for harmony outweighs a realistic appraisal of alternatives. It is characterized by an illusion of invulnerability and self-censorship of dissenting opinions. Rather than critically evaluating all viewpoints, group members often suppress conflicting information to maintain consensus, leading to flawed decision-making processes.

34. (A) Making individual contributions identifiable
Social loafing can be reduced by ensuring that each member's efforts are visible and evaluated. When individual contributions are identifiable, the diffusion of responsibility is minimized, and personal accountability increases. This motivates members to work harder because they know their performance is being monitored. Increasing group size or encouraging anonymity usually exacerbates social loafing in collective tasks.

35. (A) Both A and R are true and R is the correct explanation of A.
Proximity is a powerful predictor of interpersonal attraction because physical closeness provides frequent opportunities for interaction. According to the mere exposure effect, repeated contact with a person generally increases liking and familiarity. Therefore, people are more likely to form friendships and romantic relationships with those who live or work in close geographic proximity to them.

36. (D) Proximity — Liking those who are physically distant
Proximity refers to geographical nearness, and research consistently shows that it increases rather than decreases interpersonal attraction. People are more likely to form bonds with those they encounter frequently due to physical closeness. The statement that proximity involves liking those who are distant is the opposite of how this factor functions in social psychology and attraction.

37. (C) Complementarity
Complementarity is the principle that people are attracted to others whose traits or skills balance their own. This "opposites attract" idea suggests that individuals seek partners who possess qualities they lack. For instance, a dominant person might be attracted to a submissive one, or a disorganized person might appreciate a partner who is highly structured and organized.

38. (B) P-3, Q-1, R-4, S-2
Similarity involves matching attitudes and values, while physical attractiveness is often linked to the halo effect, where beautiful people are perceived as having other positive traits. Reciprocity refers to mutual liking, and proximity involves geographical nearness. These factors together provide a comprehensive framework for understanding why and how individuals become attracted to one another in social settings.

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79. Which of the following is a correct statement about "Secondary Groups"?
(A) They are usually large, formal, and impersonal.
(B) They are characterized by intimate, face-to-face association.
(C) They are the first groups we belong to in childhood.
(D) They are based on deep emotional commitment.

80. Arrange the following stages of Friendship formation in the typical sequence:
I. Exploration (getting to know)
II. Sampling (initial contact)
III. Institutionalization (stable friendship)
IV. Bargaining (negotiating roles)
(A) II, I, IV, III
(B) I, II, III, IV
(C) II, IV, I, III
(D) IV, II, I, III

81. Identify the INCORRECT statement regarding "Conformity."
(A) It involves changing behavior to match common group norms.
(B) It only occurs when there is a direct order from an authority.
(C) It was studied by Solomon Asch using objective line judgments.
(D) It can be influenced significantly by the size of the majority.

82. What is the most appropriate term for "adjustment without the elimination of the differences"?
(A) Accommodation
(B) Assimilation
(C) Cooperation
(D) Conflict

83. Which of the following pairs is INCORRECTLY MATCHED?
(A) Cooperation — Associative
(B) Conflict — Dissociative
(C) Competition — Associative
(D) Accommodation — Associative

84. If a manager treats an employee well because the manager expects the employee to work harder in return, this is an application of:
(A) Symbolic Interactionism
(B) Role Theory
(C) Groupthink
(D) Social Exchange Theory

85. Read the following statements and select the correct option.
Statement I: Physical attractiveness is only important in the early stages of a relationship.
Statement II: Similarity in attitudes becomes more important as a relationship progresses.
(A) Both statements are correct.
(B) Statement I is correct, but Statement II is incorrect.
(C) Statement I is incorrect, but Statement II is correct.
(D) Both statements are incorrect.

86. Which is NOT a symptom of Groupthink?
(A) Belief in inherent morality of the group
(B) Encouragement of "devil's advocate" roles
(C) Self-censorship
(D) Stereotyped views of out-groups

87. Which concept explains why people might work less hard in a group project than on an individual project?
(A) Social Facilitation
(B) Group Polarization
(C) Bystander Effect
(D) Social Loafing

88. What is "Intimacy" in Sternberg's theory?
(A) Feelings of closeness, connectedness, and bondedness
(B) The motivational drive that leads to physical romance
(C) The cognitive decision to maintain a stable relationship
(D) The primary physical attraction existing between partners

89. Who is the author of "Mind, Self, and Society"?
(A) Herbert Blumer
(B) Charles Cooley
(C) George Herbert Mead
(D) Erving Goffman

90. Which of the following is a correct statement about "Group Dynamics"?
(A) It involves the study of how groups form, their structure, and processes.

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no emergency.
(A) Both A and R are true and R is the correct explanation of A.
(B) Both A and R are true but R is not the correct explanation of A.
(C) A is true but R is false.
(D) A is false but R is true.

46. Which of the following is a correct statement regarding the stages of friendship formation?
(A) They are primarily formed through formal legal contracts.
(B) They are primarily determined by socio-economic status.
(C) They are characterized by a lack of mutual reciprocity.
(D) Initial stages are based on proximity and similarity.

47. Identify the INCORRECT statement regarding the "similarity-attraction effect."
(A) It suggests that we are attracted to people who are our polar opposites in values.
(B) It applies primarily to shared attitudes and deeply held religious beliefs.
(C) It applies to demographic traits like age, gender, and socioeconomic status.
(D) It helps in validating our own personal worldview and sense of reality.

48. Match the items in List I with the corresponding items in List II:
List I: (Concept)
P. Social Loafing
Q. Social Facilitation
R. Bystander Effect
S. Symbolic Interactionism
List II: (Key Proponent)
1. Robert Zajonc
2. Latane and Darley
3. Max Ringelmann
4. Herbert Blumer
(A) P-3, Q-2, R-1, S-4
(B) P-3, Q-1, R-2, S-4
(C) P-1, Q-3, R-2, S-4
(D) P-4, Q-1, R-2, S-3

49. Which term accurately describes a person's evaluation of the "fairness" of the rewards they receive relative to their inputs compared to others?
(A) Complementarity
(B) Distributive Justice
(C) Social Facilitation
(D) Role Strain

50. Which of the following pairs is INCORRECTLY MATCHED?
(A) Latane — Prison simulation study
(B) Asch — Line length study
(C) Milgram — Shock generator study
(D) Zajonc — Cockroach social facilitation study

51. If a group of experts makes a disastrous decision because they suppressed dissenting opinions to maintain group unity, they have fallen victim to:
(A) Social Loafing
(B) Role Conflict
(C) Groupthink
(D) Assimilation

52. Consider the following statements regarding characteristics of "In-groups":
1. Sense of loyalty and "we-ness."
2. Perception of superiority over out-groups.
3. Total lack of internal norms or rules.
Which of the above statement(s) is/are correct?
(A) 1 and 2 only
(B) 2 and 3 only
(C) 1 and 3 only
(D) 1, 2, and 3

53. Read the following statements and select the correct option.
Statement I: Reference groups only provide a positive model for behavior.
Statement II: Individuals may belong to a group but use a different group as a reference.
(A) Both statements are correct.
(B) Statement I is correct, but Statement II is incorrect.
(C) Statement I is incorrect, but Statement II is correct.
(D) Both statements are incorrect.

54. Which of the following is NOT a type of social interaction?
(A) Cooperation
(B) Social Stratification
(C) Competition
(D) Conflict

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ANSWERS

1. (B) Social interaction
Social interaction refers to the dynamic sequence of social actions between individuals or groups who modify their actions and reactions due to their partners. It serves as the fundamental building block of social life, enabling the formation of complex social structures and relationships through communication and mutual influence in various everyday contexts.

2. (A) Subjective meaning attached by actors
Max Weber defined social action as behavior to which the acting individual attaches a subjective meaning. For an action to be considered social, it must take account of the behavior of others and be oriented accordingly. This subjective orientation distinguishes social actions from mere physical reactions or purely solitary behaviors within a society.

3. (C) It involves working together toward a common goal.
Cooperation is an associative social process where individuals or groups combine their efforts to achieve a shared objective. This mutual aid is essential for social stability and the survival of any community. It can be formal or informal, and it is found in both traditional and modern societies to facilitate collective success.

4. (D) It involves a direct physical struggle to destroy the opponent.
Competition is a social process involving an impersonal struggle for rewards that are in limited supply. Unlike conflict, competition is regulated by social norms and rules and does not involve direct physical violence or the destruction of rivals. It is usually a continuous process focused on achieving a goal rather than harming others.

5. (A) Both A and R are true and R is the correct explanation of A.
Accommodation is a process of social adjustment where individuals or groups resolve conflicts by reaching an agreement or truce. It allows parties with different interests to live and work together without requiring total cultural fusion or assimilation. This social mechanism is vital for maintaining peace and order in diverse and complex societies.

6. (B) Conflict — Goal-oriented with rules
Conflict is a dissociative process characterized by a direct struggle where the primary focus is on defeating or eliminating the opponent. Unlike competition, which is goal-oriented and governed by established rules, conflict often involves personal hostility and emotional intensity. This makes the description of conflict as rule-bound and goal-oriented fundamentally inaccurate in sociology.

7. (D) A process of seeking rewards by eliminating rivals
Conflict is defined as a social process where individuals or groups seek to attain rewards by directly challenging, neutralizing, or eliminating their rivals. It is a dissociative interaction that often involves emotional tension and a lack of formal rules. This distinguishes it from cooperation, which involves working together, and assimilation, which involves cultural merging.

8. (A) P-4, Q-3, R-1, S-2
Social interactions are categorized based on their characteristics. Cooperation involves joint efforts for shared objectives, while conflict is a direct and conscious struggle. Accommodation refers to a temporary adjustment or truce between opposing parties. Assimilation represents the permanent fusion of distinct groups into a unified culture, completing the mapping of these essential social processes.

9. (C) Competition
Competition involves a struggle for a goal or reward, such as a trophy, while following specific rules and remaining impersonal. In this scenario, the student focuses on winning rather than attacking the opponent, which aligns with the definition of competition. It is a regulated process where the objective is achieving excellence relative to others.

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in a given role
(B) The internal conflict that occurs between two different roles
(C) A socially defined position in a group or society
(D) The continuous process of learning basic group norms

68. Who developed the "Triangular Theory of Love"?
(A) Zick Rubin
(B) Elaine Hatfield
(C) John Bowlby
(D) Robert Sternberg

69. Which of the following is a correct statement about "Passion" in Sternberg's theory?
(A) It is the emotional component involving closeness.
(B) It is the cognitive component involving the decision to love.
(C) It is the motivational component involving physical attraction.
(D) It is the only component required for companionate love.

70. Identify the INCORRECT statement regarding "Social Interaction."
(A) It can occur through symbols and gestures.
(B) It is always face-to-face.
(C) It is the foundation of social structure.
(D) It involves reciprocal influence.

71. Which of the following pairs is correctly matched?
(A) Passion + Commitment — Companionate Love
(B) Intimacy + Commitment — Fatuous Love
(C) Intimacy only — Empty Love
(D) Intimacy + Passion — Romantic Love

72. Which of the following is the most widely accepted explanation for the proximity effect in attraction?
(A) Repeated exposure (mere exposure effect) increases liking.
(B) People like those who are different from them.
(C) Distance makes the heart grow fonder.
(D) Physical nearness decreases the frequency of interaction.

73. A student feels torn between studying for an exam and attending a mandatory family function. This is:
(A) Role strain
(B) Role exit
(C) Role conflict
(D) Role taking

74. Read the following statements and select the correct option.
Statement I: Cooperation is essential for the survival of any society.
Statement II: Conflict is always dysfunctional and serves no social purpose.
(A) Both statements are correct.
(B) Statement I is correct, but Statement II is incorrect.
(C) Statement I is incorrect, but Statement II is correct.
(D) Both statements are incorrect.

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75. Which is NOT a characteristic of "Assimilation"?
(A) Unification of attitudes
(B) Adoption of new cultural patterns
(C) Development of a common culture
(D) Preservation of distinct cultural identities

76. In an emergency, a person is less likely to help if there are many other people around. This is known as:
(A) Social Loafing
(B) Diffusion of responsibility
(C) Groupthink
(D) Deindividuation

77. What is "Role Set"?
(A) A collection of different statuses held by one person
(B) The process of moving from one role to another
(C) A number of roles attached to a single status
(D) The conflict between two different statuses

78. Which theorist is most associated with the "Social Exchange Theory" in terms of "Comparison Level"?
(A) George Mead
(B) Erving Goffman
(C) Herbert Blumer
(D) Thibaut and Kelley

individuals navigate various social spheres, the idea that a person occupies only one role during their entire lifetime is fundamentally incorrect.

20. (D) Role conflict
Role conflict occurs when a person faces contradictory demands from two or more different roles they hold. In this case, the woman experiences tension between the requirements of her professional career and her responsibilities as a mother. This differs from role strain, which involves difficulties meeting the multiple expectations within a single social role.

21. (C) Master status — Least important identity
A master status is the primary social identity that overshadows all other statuses a person holds. It is the most important status in terms of social identity and often shapes a person's entire life and interactions. Describing it as the least important identity is a direct contradiction of its sociological definition and its impact on social perception.

22. (A) 1 and 2 only
Role conflict arises when an individual experiences incompatible expectations from two or more separate roles. It is distinct from role strain, which occurs when a person struggles with different demands within just one role. Resolving role conflict often involves prioritizing one role over another to manage the competing pressures effectively in a social context.

23. (D) Role conflict
This situation illustrates role conflict because the individual must navigate the incompatible demands of two different roles: police officer and brother. As an officer, he is expected to uphold the law, but as a brother, he may feel a duty to protect family. This clash between distinct social positions creates significant personal and ethical tension.

24. (A) Both statements are correct.
Status and role are interconnected concepts in sociology. Status represents a person's position within a social structure, such as a teacher or student. Role refers to the behaviors, duties, and expectations attached to that specific status. Essentially, status is what a person is, while the role is the dynamic aspect or what a person does.

25. (A) Both A and R are true and R is the correct explanation of A.
Social loafing is the tendency for individuals to exert less effort when working in a group compared to working alone. This phenomenon is more common in large groups because individual contributions become less identifiable. As group size increases, the sense of personal accountability decreases, leading members to believe their lack of effort will go unnoticed.

26. (A) Static and unchanging nature of group relations
Group dynamics refers to the influential processes and shifting relationships that occur within a group. It is characterized by high interdependence and the continuous formation of norms and behaviors. Because groups are constantly evolving in response to internal and external pressures, the idea that group relations are static and unchanging is contrary to the core concept.

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27. (D) Reference group
A reference group is a social group that individuals use as a standard for evaluating their own qualities, circumstances, and behaviors. When a doctor compares their performance against the standards of a professional association, they are using that group as a benchmark. Reference groups provide the norms and values that guide an individual's self-assessment and social identity.

28. (B) P-2, Q-3, R-1, S-4
In-groups are defined by loyalty and a sense of "we," whereas out-groups are perceived as different or "they." Reference groups serve as standards for self-comparison and evaluation of behavior. Secondary groups are characterized by formal, impersonal relationships. This categorization helps sociologists understand how individuals relate to different social units and how these units influence behavior.

29. (C) Conformity to group pressure
Solomon Asch conducted famous experiments to investigate the extent to which social pressure from a majority group could influence a person to conform. Participants often gave obviously incorrect answers regarding the length of lines because they wanted to fit in with the rest of the

(B) It focuses exclusively on the static aspects of institutional group life.
(C) It was founded and popularized by the social scientist Stanley Milgram.
(D) It studies only large-scale social movements and their global impact.

91. Identify the INCORRECT statement regarding "Social Exchange Theory."
(A) It views social behavior as an exchange of tangible or intangible goods.
(B) It assumes humans are rational beings.
(C) It uses concepts like "cost," "reward," and "profit."
(D) It posits that individuals are purely altruistic and never seek rewards.

92. Which of the following is the most accurate example of "Complementarity" in attraction?
(A) Two individuals who both have a passion for mountain climbing.
(B) A talkative person being attracted to a very good listener.
(C) Two individuals who both have earned PhDs in theoretical physics.
(D) Two individuals who live together in the same apartment building.

93. Which of the following pairs is INCORRECTLY MATCHED?
(A) Primary Group — Family
(B) Secondary Group — University
(C) Out-group — Feelings of "we-ness"
(D) Reference Group — Role models

94. A researcher finds that cyclists pedal faster when racing against each other than when racing against a clock. This demonstrates:
(A) Social Loafing
(B) Groupthink
(C) Obedience
(D) Social Facilitation

95. Read the following statements and select the correct option.
Statement I: Status and Role are two sides of the same coin.
Statement II: An individual can have a status without having a role.
(A) Both statements are correct.
(B) Statement I is correct, but Statement II is incorrect.
(C) Statement I is incorrect, but Statement II is correct.
(D) Both statements are incorrect.

96. Which factor is NOT typically associated with "Friendship Formation"?
(A) Proximity
(B) Genetic mutation
(C) Shared interests
(D) Reciprocal self-disclosure

97. In the context of "Accommodation," what is "Arbitration"?
(A) A voluntary and mutual agreement to forget all group differences.
(B) The use of a third party whose resolution is considered binding.
(C) The total merging of two different and distinct cultural identities.
(D) A violent struggle to end all competition between two major rivals.

98. What is the "nature" of social interaction?
(A) It is a reciprocal influence individuals exert on each other.
(B) It is a purely biological process determined by physical genes.
(C) It is a one-way process involving only a single active sender.
(D) It is found only in human-animal interactions in a wild setting.

99. Which theorist focused on "symbolic" meanings in interaction?
(A) Max Weber
(B) George Homans
(C) Herbert Blumer
(D) Robert Zajonc

100. Which of the following is a correct statement regarding "Reference Groups"?
(A) They are always groups to which we currently belong.
(B) They have no significant influence on individual personality.
(C) They are always significantly smaller than primary groups.
(D) They serve as a standard for evaluating our own behavior.

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39. (B) Statement I is correct, but Statement II is incorrect.
Reinforcement theory posits that we are attracted to those whose behavior provides us with rewards. Social Exchange theory, however, does not suggest we maintain only costly relationships; rather, it argues that we maintain relationships where rewards exceed costs. Thus, the idea that individuals seek out or maintain relationships purely because they are expensive is fundamentally incorrect.

40. (A) Compatibility
Robert Sternberg's Triangular Theory of Love identifies three primary components: intimacy, passion, and commitment. Intimacy refers to emotional closeness, passion involves physical attraction and sexual consummation, and commitment is the cognitive decision to maintain the relationship. Compatibility, while important for long-term relationships, is not one of the three foundational pillars defined in Sternberg's specific psychological model of love.

41. (C) Companionate love
Companionate love is characterized by high levels of intimacy and commitment but lacks intense passion. It is typical of long-term marriages where the physical spark has diminished, but deep affection and a shared life remain. This type of love reflects a stable and enduring bond based on mutual trust, friendship, and a long-term dedication to the partnership.

42. (D) 1, 2, and 3
Consummate love is the complete form of love that incorporates all three components of Sternberg's triangle: intimacy, passion, and commitment. It represents an ideal relationship where partners share deep emotional secrets, maintain physical attraction, and are committed to staying together. Achieving and maintaining this balance is considered the pinnacle of romantic relationships according to Sternberg's theory.

43. (D) Social Facilitation
Social facilitation is the tendency for people to perform better on simple or well-learned tasks when others are watching. This occurs because the presence of an audience increases physiological arousal, which enhances the most likely response. While it improves performance on easy tasks, it can actually hinder performance on complex or new tasks that have not been mastered.

44. (B) Stanley Milgram
Stanley Milgram conducted a series of controversial experiments to study obedience to authority. Participants were instructed to deliver increasingly powerful electric shocks to a learner who gave wrong answers. Although the learner was an actor and the shocks were fake, the experiment revealed that a high percentage of participants would follow orders even when they believed they were causing harm.

45. (A) Both A and R are true and R is the correct explanation of A.
Pluralistic ignorance contributes to the bystander effect because people often look to others to gauge how they should respond in ambiguous situations. If no one else appears concerned or takes action, an individual may incorrectly assume that the situation is not an emergency. This collective inaction reinforces the belief that help is not required, preventing any intervention.

46. (D) Initial stages are based on proximity and similarity.
Research on friendship formation shows that early stages are heavily influenced by physical closeness and shared characteristics. Proximity provides the opportunity for interaction, while similarity in attitudes, values, and interests provides the foundation for mutual liking. These factors make interaction more predictable and rewarding, facilitating the transition from acquaintances to friends during the initial phases of bonding.

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47. (A) It suggests that we are attracted to people who are our polar opposites in values.
The similarity-attraction effect posited in social psychology indicates that people are drawn to those who share their attitudes, values, and demographic traits. Shared worldviews provide validation and reduce the potential for conflict. The claim that we are attracted to our polar opposites in values is incorrect, as opposites in fundamental beliefs usually lead to friction and avoidance.

85. (A) Both statements are correct.
Research indicates that physical attractiveness is a major factor in the initial stages of a relationship, as it is immediately visible and influential. However, as two people get to know each other better, similarity in attitudes, values, and personality becomes more important for maintaining long-term compatibility and satisfaction. This shift ensures that the relationship is built on a deeper foundation.

86. (B) Encouragement of "devil's advocate" roles
Groupthink is characterized by a drive for consensus that suppresses dissent. Symptoms include self-censorship, stereotyped views of outsiders, and an illusion of morality. Encouraging a "devil's advocate" to challenge the majority opinion is actually a technique used to prevent groupthink, as it forces the group to consider alternative viewpoints and critically evaluate their assumptions before making a final decision.

87. (D) Social Loafing
Social loafing is the tendency for individuals to put in less effort when they are part of a group where individual performance is not specifically evaluated. Because the responsibility is shared, members may feel that their own contribution is less important or will not be noticed. This phenomenon explains why group projects sometimes suffer from lower individual productivity compared to solo tasks.

88. (A) Feelings of closeness, connectedness, and bondedness
In Sternberg's Triangular Theory of Love, intimacy represents the emotional component of a relationship. it involves sharing personal thoughts, feeling close to the partner, and experiencing a sense of warmth and mutual support. Unlike passion, which is driven by physical attraction, or commitment, which is a cognitive decision, intimacy is about the psychological bond and emotional connection between two people.

89. (C) George Herbert Mead
George Herbert Mead was a philosopher and sociologist whose lectures were posthumously published as the influential book "Mind, Self, and Society." He is considered a founder of symbolic interactionism, emphasizing how the self develops through social experience and the use of symbols. His work explores the relationship between individual consciousness and the social processes that shape human behavior and identity.

90. (A) It involves the study of how groups form, their structure, and processes.
Group dynamics is the scientific study of the nature of groups, their development, and the interrelationships between individuals and groups. It focuses on how groups influence behavior, how decisions are made, and how group structures evolve over time. Contrary to being static, it emphasizes the active and changing nature of group life and the complex forces that shape collective actions.

91. (D) It posits that individuals are purely altruistic and never seek rewards.
Social Exchange Theory is built on the assumption that humans are rational actors who seek to maximize rewards and minimize costs in their social interactions. It views relationships as transactions involving tangible or intangible goods. The idea that individuals are purely altruistic and never motivated by rewards is contrary to the theory's core emphasis on self-interest and the calculation of profit.

92. (B) A talkative person being attracted to a very good listener.
Complementarity in attraction suggests that individuals seek partners who possess traits that balance or complete their own. A talkative person and a good listener form a pair where their communication styles fit together effectively. This "opposites attract" dynamic focuses on how different characteristics can create a harmonious and functional relationship by meeting each other's psychological or social needs.

93. (C) Out-group — Feelings of "we-ness"
Feelings of "we-ness" and loyalty are defining characteristics of an in-group, not an out-group. An out-group is a group toward which an individual feels a sense of being different, competitive, or even hostile. The incorrect matching of "we-ness" with out-groups ignores the fundamental sociological distinction between

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for the study of social loafing, highlighting how individual productivity can decrease in group settings.

58. (A) It is the act of detaching oneself from a role while performing it.
Role distance, a concept introduced by Erving Goffman, occurs when an individual performs a role but remains psychologically detached from it to show that the role does not define their true self. For example, a waiter may perform their duties but use sarcasm or aloofness to indicate they are more than just their job. It is not about leaving roles.

59. (D) It is a dissociative social process.
Assimilation is an associative social process where distinct cultural groups merge into a single, unified culture. It is a slow, gradual process involving the adoption of new cultural patterns and the unification of attitudes. Describing it as dissociative is incorrect because it aims to bring groups together rather than pulling them apart through opposition, competition, or direct conflict.

60. (A) II, I, IV, III
The Bystander Intervention Model describes five steps required for a person to help in an emergency. First, they must notice the event. Second, they must interpret it as an emergency. Third, they must assume personal responsibility. Fourth, they must decide how to help. Finally, they must implement the help. Skipping any step usually results in the person not helping.

61. (C) Being born into a specific caste
Ascribed status is a social position assigned to an individual at birth or involuntarily later in life, based on characteristics like race, gender, or family background. Being born into a caste is a classic example because it is determined by birth and is generally unchangeable. In contrast, statuses like being a doctor or athlete are achieved through personal effort, merit, or choice.

62. (D) Sternberg — Social Facilitation
Robert Sternberg is famous for his Triangular Theory of Love, not for social facilitation. Social facilitation is a concept most closely associated with researchers like Robert Zajonc and Norman Triplett. George Herbert Mead is correctly linked to the self, Herbert Blumer to the components of meaning and language, and George Homans to the development of social exchange theory in sociology.

63. (A) Competition
Competition occurs when two or more parties strive for a goal or reward that is in limited supply, such as a single bonus. This process is generally impersonal and governed by organizational rules. Unlike conflict, it does not necessarily involve hostility or an intent to harm the other party; rather, it focuses on achieving excellence to secure the desired outcome.

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64. (A) Both statements are correct.
In-groups are social groups toward which an individual feels loyalty and a sense of belonging, often referred to as "we-groups." Out-groups are those toward which an individual feels antagonism, competitiveness, or a sense of being different, often called "they-groups." This distinction is fundamental to understanding group identity, intergroup relations, and the psychological basis for various forms of social prejudice.

65. (B) Biological Predeterminism
Social psychology focuses on situational and social factors like proximity, similarity, and physical attractiveness to explain why people are drawn to each other. Biological predeterminism, which suggests that behavior is solely controlled by genes, is not typically listed as a primary social attraction factor. Instead, the field emphasizes the complex interplay between social environment, perception, and individual psychological needs in relationships.

66. (A) We meet them in a pleasant environment.
The Reinforcement-Affect Model suggests that people are attracted to those associated with positive feelings. If we meet someone in a pleasant environment, the positive feelings from the setting can be transferred to the person through classical conditioning. This makes us more likely to like them because the encounter was rewarding and associated with a generally positive and comfortable affective state.

48. (B) P-3, Q-1, R-2, S-4
Max Ringelmann identified social loafing, while Robert Zajonc explored social facilitation. Latane and Darley are famous for their research on the bystander effect following the Kitty Genovese case. Herbert Blumer is the key proponent of symbolic interactionism. These scholars provided the experimental and theoretical foundations for understanding how individuals behave in various social and group contexts.

49. (B) Distributive Justice
Distributive justice refers to a person's perception of fairness regarding the distribution of rewards and resources within a relationship or group. It involves comparing one's own ratio of inputs to outcomes with the ratios of others. If an individual feels they are receiving rewards proportional to their efforts compared to others, they perceive the exchange as fair and just.

50. (A) Latane — Prison simulation study
Philip Zimbardo, not Bibb Latane, conducted the famous Stanford Prison Experiment to study the psychological effects of perceived power. Solomon Asch studied conformity using line lengths, and Stanley Milgram examined obedience with the shock generator. Robert Zajonc demonstrated social facilitation using cockroaches. Therefore, pairing Latane with the prison study is factually incorrect in the history of psychology.

51. (C) Groupthink
Groupthink is a phenomenon where the desire for group cohesion and harmony leads to poor decision-making. Members suppress dissenting views and ignore alternative perspectives to maintain consensus. This often results in an illusion of unanimity and invulnerability. Famous historical blunders are often attributed to groupthink, where experts failed to challenge flawed assumptions due to social pressure within the group.

52. (A) 1 and 2 only
In-groups are social units characterized by a strong sense of loyalty, "we-ness," and shared identity. Members often perceive their group as superior to out-groups, which can lead to prejudice. However, in-groups are not lawless; they are typically governed by internal norms and rules that maintain cohesion. Thus, the statement that in-groups lack internal norms is fundamentally incorrect.

53. (C) Statement I is incorrect, but Statement II is correct.
Reference groups can provide both positive models to emulate and negative models to avoid. Furthermore, individuals do not need to be members of their reference groups; for example, a student might use a professional association as a reference without yet belonging to it. Therefore, the idea that reference groups only provide positive models is a limited and incorrect view.

54. (B) Social Stratification
Social stratification refers to the hierarchical arrangement of individuals into social layers based on wealth, power, and prestige. While it influences how people interact, it is a structural feature of society rather than a process of interaction itself. Cooperation, competition, and conflict are the actual dynamic processes through which individuals and groups relate to and influence one another.

55. (D) Reference group
A reference group serves as a standard for evaluating one's own behavior and appearance. When an individual admires a music band and begins to dress like its members, they are using the band as a benchmark for their own identity and social presentation. This influence occurs regardless of whether the individual has any personal interaction with the group members.

56. (A) Liking someone because they like us
Reciprocity of liking is the tendency for people to like others who express liking for them. This mutual attraction is a powerful factor in relationship formation because it provides social validation and reduces the risk of rejection. Knowing that someone likes us increases our self-esteem and makes us more likely to respond with positive feelings and behaviors in return.

57. (C) Max Ringelmann
Max Ringelmann was a French agricultural engineer who conducted early experiments on group performance using a tug-of-war task. He discovered that the collective effort of a group was less than the sum of the individual efforts of its members. This observation laid the groundwork

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76. (B) Diffusion of responsibility
Diffusion of responsibility is the psychological phenomenon where individuals feel less personal obligation to act in an emergency when others are present. Each person assumes that someone else will intervene or has already called for help. This is a primary driver of the bystander effect, explaining why help is less likely to be offered as the number of witnesses increases.

77. (C) A number of roles attached to a single status
A role set refers to the various roles and expectations associated with a single social status. For example, the status of "doctor" includes different roles when interacting with patients, nurses, hospital administrators, and other physicians. This concept highlights that a single social position involves complex and diverse relationships and behavioral requirements depending on the social context and the specific partners.

78. (D) Thibaut and Kelley
John Thibaut and Harold Kelley are the social psychologists who developed the concepts of "Comparison Level" and "Comparison Level for Alternatives" within Social Exchange Theory. They argued that individuals evaluate their relationship satisfaction based on their past experiences and their perception of available alternatives. Their work focused on the interdependence and rational decision-making processes that govern social relationships.

79. (A) They are usually large, formal, and impersonal.
Secondary groups are characterized by formal, task-oriented, and impersonal relationships. Unlike primary groups, which are small and involve deep emotional ties, secondary groups like corporations or universities exist to achieve specific goals. Interactions within these groups are often based on functional roles rather than personal intimacy, and membership is frequently temporary or based on specific professional or institutional needs.

80. (A) II, I, IV, III
Friendship formation typically follows a sequence beginning with initial contact and sampling potential partners. This is followed by exploration, where individuals get to know each other's interests. Bargaining involves negotiating the roles and expectations within the relationship. Finally, institutionalization occurs when the friendship becomes stable, recognized, and part of the individuals' regular social lives and routines.

81. (B) It only occurs when there is a direct order from an authority.
Conformity involves changing one's behavior to align with group norms, often without any direct command. It was famously studied by Solomon Asch, who showed how group pressure affects individual judgment. Obedience, on the other hand, specifically refers to following direct orders from an authority figure. Therefore, the claim that conformity only occurs through direct orders is a conceptual error.

82. (A) Accommodation
Accommodation is a social process where individuals or groups make adjustments to coexist despite their differences or previous conflicts. It allows for a peaceful resolution or a temporary truce that prevents further hostility without requiring the parties to merge their identities or eliminate their unique characteristics. This process is essential for maintaining social order in pluralistic and diverse societies.

83. (C) Competition — Associative
Competition is classified as a dissociative social process because it involves a struggle between parties for limited resources or rewards. While it is governed by rules, it emphasizes individual or group gain over others rather than mutual cooperation. Associative processes like cooperation and accommodation bring people together, whereas dissociative processes like competition and conflict tend to pull them apart.

84. (D) Social Exchange Theory
This situation reflects Social Exchange Theory because the manager's behavior is based on the expectation of a future reward, which is increased productivity from the employee. The theory posits that social interactions are governed by a cost-benefit analysis and the principle of reciprocity. People engage in behaviors that they believe will lead to favorable outcomes or rewards from others.

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CHAPTER 26
Community Health and Counseling

1. Which of the following best describes the nature of community health?
(A) Clinical focus on the treatment of infectious diseases
(B) Collective effort to protect and improve member health
(C) Assessment of the health status of high-income citizens
(D) Medical specialization in hospital surgical interventions

2. Counseling is defined as a professional relationship that empowers diverse individuals, families, and groups to:
(A) Accomplish mental health, wellness, education, and career goals.
(B) Receive medical prescriptions for chronic illnesses.
(C) Accept the counselor's personal values and religious beliefs.
(D) Follow strict legal advice regarding property disputes.

3. Given below are two statements regarding the distinction between Community Health and Public Health:
Statement I: Public Health is often associated with governmental efforts and legislation at a macro level.
Statement II: Community Health focuses on a specific geographic area or a group with common characteristics.
(A) Statement I is correct, but Statement II is incorrect.
(B) Statement I is incorrect, but Statement II is correct.
(C) Both Statement I and Statement II are correct.
(D) Both Statement I and Statement II are incorrect.

4. Identify the INCORRECT statement regarding the distinction between counseling and psychotherapy:
(A) Counseling often addresses developmental and situational issues.
(B) Psychotherapy usually involves deeper, longer-term work on personality disorders.
(C) Psychotherapy is more likely to focus on past experiences and unconscious processes.
(D) Counseling is exclusively limited to the administration of psychiatric medications.

5. Identify the correct matches between List I and List II using the codes given below:
List I: (Community Type)
P. Rural Community
Q. Urban Community
R. Tribal Community
S. Primary Health Care
List II: (Health Characteristic)
1. Focus on Alma Ata declaration
2. Challenges include overcrowding and pollution
3. Reliance on traditional medicine and forest-based health
4. Limited access to specialized tertiary care
(A) P-2, Q-4, R-1, S-3
(B) P-3, Q-1, R-4, S-2
(C) P-4, Q-2, R-3, S-1
(D) P-1, Q-3, R-2, S-4

6. Which of the following is a primary characteristic regarding individual health versus community health?
(A) Community health ignores the biological factors of individual members.
(B) Individual health focuses on the physiological well-being of a single person.
(C) Individual health is measured by the infant mortality rate of a nation.
(D) Community health is the sum of private medical records in a hospital.

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groups we belong to and those we perceive as external or opposing.

94. (D) Social Facilitation
The cyclist example is a classic demonstration of social facilitation, where the presence of others increases physiological arousal and improves performance on well-learned tasks. Norman Triplett first observed this effect in the late 19th century. When competing against others, the added social pressure and arousal drive individuals to perform better and faster than when they are simply working alone.

95. (B) Statement I is correct, but Statement II is incorrect.
Status and role are inseparable concepts; status is a position in a social system, and role is the behavior expected from that position. One cannot have a social status without an associated set of roles that define its function. Therefore, the claim that a status can exist without a role is sociologically incorrect, as they are two sides of the same coin.

96. (B) Genetic mutation
Friendship formation is driven by social and psychological factors such as proximity, shared interests, and reciprocal self-disclosure. These elements facilitate interaction and build trust between individuals. Genetic mutation is a biological process unrelated to the social mechanisms of forming and maintaining personal relationships. Sociology and social psychology emphasize environmental and interactive factors rather than genetic alterations in the study of friendship.

97. (B) The use of a third party whose resolution is considered binding.
Arbitration is a formal method of accommodation where two conflicting parties agree to let a neutral third party make a decision to resolve their dispute. Unlike mediation, where the third party only suggests solutions, the arbitrator's decision is final and legally or socially binding. This process allows groups to settle conflicts and return to functional cooperation without continued open hostility.

98. (A) It is a reciprocal influence individuals exert on each other.
Social interaction is fundamentally a reciprocal process where the actions of one person trigger a response from another, which in turn influences the first person. This mutual influence is the basis of all social life and structure. It involves communication, whether through words or symbols, and requires that participants take each other's existence and behavior into account during the process.

99. (C) Herbert Blumer
Herbert Blumer is the scholar most associated with the development of symbolic interactionism, a perspective that focuses on the meanings people attach to symbols during social encounters. He argued that human interaction is mediated by the use of symbols and interpretation. His work expanded on the ideas of George Herbert Mead, emphasizing the active role of individuals in creating social reality.

100. (D) They serve as a standard for evaluating our own behavior.
Reference groups are social units that individuals use as a standard for evaluating their own attitudes, values, and behaviors. These groups provide a frame of reference for self-assessment and social comparison. Individuals do not necessarily have to belong to these groups to be influenced by their norms, standards, and perceived expectations, making them vital for social identity and self-evaluation.

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(B) P-2, Q-3, R-4, S-1
(C) P-4, Q-1, R-2, S-3
(D) P-1, Q-4, R-3, S-2

16. Which of the following is a fact about the Alma Ata Declaration of 1978?
(A) It focused exclusively on urban hospital infrastructure.
(B) It declared health as a fundamental human right.
(C) It rejected the concept of Primary Health Care.
(D) It was organized by the World Trade Organization.

17. Directive counseling is most closely associated with which approach?
(A) The counselor plays a passive role and lets the client lead.
(B) The counselor takes an active role in diagnosing and suggesting solutions.
(C) The counselor avoids all forms of communication.
(D) The counselor focuses only on the client's dreams.

18. Consider the following statements about Environmental Health:
1. It is a vital component of community health.
2. It focuses on physical, chemical, and biological factors external to a person.
3. It excludes the study of water quality and waste management.

Which of the above statement(s) is/are correct?
(A) 1 and 3 only
(B) 1 and 2 only
(C) 2 and 3 only
(D) 1, 2, and 3

19. Which statement is INCORRECT regarding the role of an Auxiliary Nurse Midwife (ANM)?
(A) Provision of maternal and child health services
(B) Operation primarily at the rural sub-center level
(C) Formulation of national-level health budgets
(D) Implementation of routine immunization programs

20. In the following question, a statement of Assertion (A) is followed by a statement of Reason (R). Choose the correct option:
Assertion (A): In various cultural contexts, counseling faces challenges due to the stigma associated with mental health.
Reason (R): Cultural factors often influence how individuals perceive and seek psychological help.
(A) Both A and R are true and R is the correct explanation of A.
(B) Both A and R are true but R is not the correct explanation of A.
(C) A is true but R is false.
(D) A is false but R is true.

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21. A person who has lost a limb in an accident is being helped to relearn daily tasks and adjust to a new lifestyle. This is an example of:
(A) Preventive health
(B) Promotive health
(C) Rehabilitative role
(D) Primary assessment

22. Arrange the following steps of the counseling process in logical order:
1. Assessment of the problem
2. Termination of the session
3. Establishing rapport
4. Implementation of intervention

(A) 3-1-4-2
(B) 1-3-4-2
(C) 3-4-1-2
(D) 4-1-3-2

23. Which of the following is NOT a quality of an effective counselor?
(A) Maintaining a high degree of self-awareness
(B) Displaying flexibility in clinical approaches
(C) Utilizing professional communication skills
(D) Imposing personal moral codes on clients

24. Given below are two statements regarding group counseling:
Statement I: Group counseling allows members to realize they are not alone in their struggles.
Statement II: Group counseling is always more effective than individual counseling for every psychological disorder.
(A) Statement I is correct, Statement II is incorrect.

7. Which role of community health focuses on preventing the occurrence of diseases before they happen?
(A) Curative role
(B) Rehabilitative role
(C) Administrative role
(D) Preventive role

8. Consider the following statements about Accredited Social Health Activist (ASHA) workers:
1. They act as a bridge between the community and the public health system.
2. They are authorized to independently prescribe long-term psychiatric medications.
3. They promote immunization and institutionalized delivery.

Which of the above statement(s) is/are correct?
(A) 1 and 2 only
(B) 2 and 3 only
(C) 1 and 3 only
(D) 1, 2, and 3

9. What is the most appropriate method for community health education when addressing a localized sanitation issue?
(A) National-level television broadcasts
(B) Distribution of medical journals
(C) Localized group demonstrations
(D) International health conferences

10. In the following question, a statement of Assertion (A) is followed by a statement of Reason (R). Choose the correct option:
Assertion (A): Community participation is essential for the sustainability of health programs.
Reason (R): Participation ensures that the programs are tailored to the specific needs and cultural context of the people.
(A) Both A and R are true and R is the correct explanation of A.
(B) Both A and R are true but R is not the correct explanation of A.
(C) A is true but R is false.
(D) A is false but R is true.

11. A counselor helps a client identify their own strengths to solve a problem without giving direct orders. This is an application of:
(A) Directive counseling
(B) Clinical psycho-pharmacology
(C) Authoritarian counseling
(D) Non-directive counseling

12. Arrange the following stages of the individual counseling process in the correct chronological sequence:
1. Intervention
2. Assessment
3. Rapport building
4. Termination

(A) 3-2-1-4
(B) 2-3-4-1
(C) 1-3-2-4
(D) 3-1-2-4

13. Identify the correct pair regarding types of counseling:
(A) Career Counseling – Diagnosing severe schizophrenia
(B) Family Counseling – Focused solely on the oldest male member
(C) Grief Counseling – Helping individuals cope with loss
(D) Rehabilitation Counseling – Helping students choose elective subjects

14. In a tribal community, a health worker notices a high prevalence of water-borne diseases and organizes a workshop on water filtration. This represents:
(A) Only a curative role of health
(B) A purely rehabilitative role of health
(C) The neglect of community participation
(D) A competency-based community health intervention

15. Identify the correct matches between List I and List II using the codes given below:
List I: (Counseling Principle)
P. Empathy
Q. Acceptance
R. Confidentiality
S. Rapport
List II: (Description)
1. Protecting client's private information
2. Non-judgmental attitude toward the client
3. Understanding the client's world from their perspective
4. Establishing a harmonious relationship

(A) P-3, Q-2, R-1, S-4

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67. (C) A socially defined position in a group or society
Status refers to a specific rank or position that an individual occupies within a social structure. It defines where a person fits into society and helps determine their relationships with others. Each status, such as being a parent or an employee, carries a set of expectations and behaviors, known as roles, which guide how the individual interacts with their environment.

68. (D) Robert Sternberg
Robert Sternberg developed the Triangular Theory of Love to explain the complexity of romantic relationships. His model posits that love is composed of three interconnected components: intimacy, passion, and commitment. Different combinations of these three elements result in various types of love, ranging from mere liking or infatuation to the ideal form known as consummate love.

69. (C) It is the motivational component involving physical attraction.
In Sternberg's theory, passion is the component that reflects physical attraction, romance, and sexual consummation. It provides the motivational drive in romantic relationships. While intimacy involves emotional closeness and commitment involves the cognitive decision to maintain the relationship, passion is centered on the physiological arousal and intense desire that often characterize the early and exciting stages of romantic love.

70. (B) It is always face-to-face.
Social interaction involves the reciprocal influence individuals have on each other, but it does not always require physical presence. In the modern world, interaction frequently occurs through digital communication, symbols, gestures, and written text. Describing social interaction as exclusively face-to-face is incorrect, as people can interact and influence one another from great distances through various media and symbolic systems.

71. (D) Intimacy + Passion — Romantic Love
According to Sternberg, romantic love is a combination of intimacy and passion, but it lacks a long-term commitment. Companionate love combines intimacy and commitment, while fatuous love combines passion and commitment without intimacy. Identifying romantic love as the combination of emotional closeness and physical attraction correctly follows the specific classifications outlined in the Triangular Theory of Love model.

72. (A) Repeated exposure (mere exposure effect) increases liking.
The mere exposure effect explains that people tend to develop a preference for things or people simply because they are familiar with them. Proximity increases the frequency of contact, leading to repeated exposure. This familiarity generally reduces uncertainty and makes others seem more approachable and attractive, provided the initial interaction was not negative. This is the most widely accepted scientific explanation.

73. (C) Role conflict
Role conflict occurs when the demands of one role are incompatible with the demands of another role held by the same person. In this case, the student role requires studying, while the family member role requires attending a function. The individual must choose between these competing expectations, creating a situation of social and personal tension typical of role conflict.

74. (B) Statement I is correct, but Statement II is incorrect.
Cooperation is essential for societal survival as it enables collective goal achievement and stability. However, conflict is not always dysfunctional; it can serve social purposes by highlighting injustices, promoting necessary social change, and strengthening group boundaries. Therefore, the absolute claim that conflict has no social purpose is sociologically inaccurate, as conflict can be a catalyst for growth and reform.

75. (D) Preservation of distinct cultural identities
Assimilation is the process where minority groups lose their original cultural traits as they are absorbed into the dominant culture. It leads to the unification of attitudes and the development of a common culture. Since assimilation aims for cultural homogeneity, the preservation of distinct and separate cultural identities is the opposite of what occurs during a successful or complete assimilation process.

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(B) Statement I is incorrect, Statement II is correct.
(C) Both statements are correct.
(D) Both statements are incorrect.

25. Identify the correct matches between List I and List II using the codes given below:
List I: (Counseling Type)
P. Career Counseling
Q. Family Counseling
R. Eclectic Counseling
S. Rehabilitative Counseling
List II: (Primary Objective)
1. Improving communication between household members
2. Combining various theoretical approaches
3. Assisting with vocational choices and development
4. Assisting disabled individuals to achieve optimal function
(A) P-1, Q-2, R-3, S-4
(B) P-4, Q-3, R-1, S-2
(C) P-3, Q-1, R-2, S-4
(D) P-2, Q-4, R-3, S-1

26. Which of the following is an INCORRECT pair regarding health roles?
(A) Rehabilitative – Initial spread of disease
(B) Preventive – Vaccination
(C) Promotive – Health education
(D) Curative – Diagnosis and treatment

27. A counselor integrates techniques from both directive and non-directive approaches based on the client's needs. This is called:
(A) Rogerian counseling
(B) Authoritarian counseling
(C) Behavioral counseling
(D) Eclectic counseling

28. Consider the following characteristics of Community Mental Health:
1. It emphasizes community-based services rather than institutionalization.
2. It focuses on the prevention of mental disorders in the population.
3. It ignores the social determinants of mental health.
Which of the above statement(s) is/are correct?
(A) 1 and 2 only
(B) 2 and 3 only
(C) 1 and 3 only
(D) 1, 2, and 3

29. What is the most appropriate initial step in the counseling process?
(A) Prescribing medication
(B) Termination
(C) Building rapport
(D) Deep-seated psychological testing

30. In the following question, a statement of Assertion (A) is followed by a statement of Reason (R). Choose the correct option:
Assertion (A): Non-directive counseling is also known as client-centered therapy.
Reason (R): It was developed by Carl Rogers and emphasizes the client's self-actualizing tendency.
(A) Both A and R are true and R is the correct explanation of A.
(B) Both A and R are true but R is not the correct explanation of A.
(C) A is true but R is false.
(D) A is false but R is true.

31. Community health workers like ASHA are primarily selected from:
(A) The local community itself
(B) International medical universities
(C) Urban corporate hospitals
(D) Political administrative offices

32. Which of the following defines the promotive role of community health?
(A) Limiting disability following disease onset
(B) Promoting healthy lifestyles and nutrition
(C) Designing specialized antibiotic regimens
(D) Researching specialized antibiotic formulas

33. Which statement regarding counseling and advice-giving is correct?
(A) Counseling and advice-giving are fundamentally the same.
(B) Counseling empowers clients to make their own decisions.
(C) Giving advice is the core goal of professional counseling.
(D) Counseling requires no specialized professional training.

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34. Which of the following is an INCORRECT pair of counseling principles?
(A) Empathy – Taking on client feelings as a personal burden
(B) Acceptance – Viewing the client as a person of worth
(C) Confidentiality – Protecting client data from unauthorized use
(D) Genuineness – Being real and transparent in the relationship

35. Identify the correct matches between List I and List II using the codes given below:
List I: (Term)
P. Rural Health
Q. Urban Health
R. Tribal Health
S. Public Health
List II: (Definition)
1. Focus on slum populations and migration
2. Focus on primary care in villages
3. Focus on indigenous populations
4. Macro-level health policy and administration
(A) P-1, Q-2, R-4, S-3
(B) P-3, Q-4, R-2, S-1
(C) P-2, Q-1, R-3, S-4
(D) P-4, Q-3, R-1, S-2

36. A counselor helps a student explore various career paths based on their interests and aptitude. This is:
(A) Grief counseling
(B) Rehabilitative counseling
(C) Curative counseling
(D) Career counseling

37. Which of the following is NOT a method of community health education?
(A) Roleplays
(B) Posters and banners
(C) Secret individual surveillance
(D) Public lectures

38. Consider the following statements about the curative role of health services:
1. It focuses on treating patients after they have fallen ill.
2. It includes diagnostic services and medical treatment.
3. It is the only component of community health.
Which of the above statement(s) is/are correct?
(A) 1 and 2 only
(B) 1 and 3 only
(C) 2 and 3 only
(D) 1, 2, and 3

39. Given below are two statements regarding individual and community health:
Statement I: Individual health is purely a personal matter with no impact on the community.
Statement II: The health of individuals collectively determines the health of the community.
(A) Statement I is correct, Statement II is incorrect.
(B) Statement I is incorrect, Statement II is correct.
(C) Both statements are correct.
(D) Both statements are incorrect.

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40. In the following question, a statement of Assertion (A) is followed by a statement of Reason (R). Choose the correct option:
Assertion (A): Environmental health is an integral part of community health.
Reason (R): Safe water, clean air, and proper waste disposal directly influence the health of a population.
(A) Both A and R are true and R is the correct explanation of A.
(B) Both A and R are true but R is not the correct explanation of A.
(C) A is true but R is false.
(D) A is false but R is true.

41. A counseling session where the counselor actively directs the client toward a specific behavioral change is known as:
(A) Non-directive counseling
(B) Rogerian counseling
(C) Directive counseling
(D) Passive-listening counseling

42. Which of the following is a correct statement about group counseling?
(A) It provides social support and shared learning.
(B) It is for people with the same medical diagnosis.
(C) It is always conducted without professional

staff.
(D) It is illegal in multiple global jurisdictions.

43. Which of the following is an INCORRECT statement about Primary Health Care (PHC)?
(A) It should be universally accessible.
(B) It was emphasized at Alma Ata.
(C) It involves community participation.
(D) It is a high-cost specialized service.

44. The process of helping an individual cope with the emotional pain of a death is called:
(A) Career counseling
(B) Grief counseling
(C) Family counseling
(D) Directive counseling

45. Identify the correct matches between List I and List II using the codes given below:
List I: (Stage of Counseling)
P. Rapport Building
Q. Assessment
R. Intervention
S. Termination
List II: (Activity)
1. Gathering information about the client's history
2. Applying therapeutic techniques
3. Establishing trust and comfort
4. Ending the counseling relationship
(A) P-1, Q-2, R-4, S-3
(B) P-4, Q-3, R-1, S-2
(C) P-3, Q-1, R-2, S-4
(D) P-2, Q-4, R-3, S-1

46. The nature of community health implies that it is:
(A) Static and unchanging
(B) Purely biological
(C) Restricted to individual clinical records
(D) Dynamic and multidisciplinary

47. A counselor who is sensitive to diverse household structures, such as joint family dynamics, is demonstrating:
(A) Cultural competency in counseling
(B) Ignoring cultural factors
(C) Directive counseling only
(D) Rehabilitative counseling

48. Consider the following statements about Family Counseling:
1. It treats the family as a unit or system.
2. It aims to improve interpersonal relationships within the family.
3. It focuses only on the psychological state of the child.
Which of the above statement(s) is/are correct?
(A) 1 and 2 only
(B) 2 and 3 only
(C) 1 and 3 only
(D) 1, 2, and 3

49. Identify the correct pair:
(A) Carl Rogers – Directive Counseling
(B) Alma Ata – Primary Health Care
(C) ASHA – Urban Neurosurgeon
(D) Environmental Health – Purely genetic study

50. In the following question, a statement of Assertion (A) is followed by a statement of Reason (R). Choose the correct option:
Assertion (A): Eclectic counseling is a flexible approach.
Reason (R): It allows the counselor to select the best techniques from different theories to suit the client's needs.
(A) Both A and R are true and R is the correct explanation of A.
(B) Both A and R are true but R is not the correct explanation of A.
(C) A is true but R is false.
(D) A is false but R is true.

51. What is the primary focus of the rehabilitative role in community health?
(A) Preventing the initial spread of local infections
(B) Providing emergency first aid during accidents
(C) Restoring optimal functioning in individuals
(D) Educating communities about healthy diets

52. Which of the following is a key challenge for counseling in various social contexts?
(A) Over-availability of professional licensed counselors
(B) Lack of cultural diversity within the local population
(C) Absence of support systems within the

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ANSWERS

1. (B) Collective effort to protect and improve member health
Community health focuses on the collective well-being of a specific group of people living in the same geographical area. It emphasizes organized efforts and informed choices of society to prevent disease and prolong life. This approach shifts the focus from individual clinical treatment to broader social and environmental factors that affect the entire community's overall health status and longevity.

2. (A) Accomplish mental health, wellness, education, and career goals.
Counseling is a professional relationship designed to empower individuals and groups to achieve meaningful personal objectives. It involves a collaborative process where trained professionals help clients explore their feelings and behaviors to facilitate positive change. This therapeutic interaction addresses diverse needs, ranging from mental health concerns to educational and career development, ultimately enhancing the overall quality of life and self-efficacy.

3. (C) Both Statement I and Statement II are correct.
Public health primarily involves macro-level interventions, such as government policies, legislation, and nationwide health regulations aimed at protecting large populations. In contrast, community health targets specific geographic areas or groups with shared characteristics. Both fields are essential as they operate at different scales to ensure the well-being of society through policy-making, direct local engagement, and grassroots program implementation.

4. (D) Counseling is exclusively limited to the administration of psychiatric medications.
Counseling primarily addresses developmental, situational, and wellness-related concerns through therapeutic dialogue rather than medical interventions. It helps individuals manage life transitions and stress effectively. Unlike psychiatry, which involves medical degrees and the authority to prescribe drugs, counseling focuses on psychological support and behavioral change. Psychotherapy often deals with deeper, long-term personality issues and unconscious processes compared to the counseling process.

5. (C) P-4, Q-2, R-3, S-1
Rural communities often face challenges such as limited access to specialized tertiary medical care due to geographic isolation. Urban areas struggle with overcrowding and industrial pollution, while tribal communities frequently rely on traditional medicine and forest-based health resources. Primary Health Care is fundamentally rooted in the principles of the Alma Ata Declaration, which emphasizes accessible and essential healthcare for all populations.

6. (B) Individual health focuses on the physiological well-being of a single person.
Individual health centers on the clinical and physiological status of a single person, addressing specific biological and medical needs. Community health, however, looks at the collective health outcomes of a population within a specific area. While individual health involves personal medical records and treatment, community health assesses indicators like birth rates and disease prevalence across groups to improve overall societal well-being.

7. (D) Preventive role
The preventive role in community health is dedicated to stopping the onset of diseases and injuries before they occur. This is achieved through interventions like immunization, health education, and regular screenings. By focusing on risk reduction and healthy lifestyle choices, this role minimizes the overall burden of illness on the community, shifting the priority from treating sickness to maintaining wellness.

8. (C) 1 and 3 only
Accredited Social Health Activists serve as essential intermediaries between rural communities and the formal public health system. They play a critical role in promoting institutionalized deliveries and ensuring high immunization coverage. While they are trained

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(C) It is essential for the success of Primary Health Care.
(D) It involves people in planning and implementing health activities.

66. A counselor who shows genuineness is:
(A) Being authentic and transparent
(B) Pretending to be someone they are not
(C) Being cold and distant
(D) Strictly following a written script

67. Which of the following is a negative aspect often found in tribal community health?
(A) High access to urban medical facilities
(B) Abundance of specialized specialist care
(C) Geographic isolation from health services
(D) Low reliance on traditional medicine use

68. The termination phase in counseling signifies:
(A) The start of the problem-solving phase
(B) The first time the counselor meets the client
(C) A permanent failure of the therapy
(D) The end of the professional relationship

69. Which of the following is a correct statement regarding Community Mental Health?
(A) It treats mental illness only within large psych wards.
(B) It ignores the influence of family on mental health.
(C) It focuses on prevention and community support.
(D) It is only applicable to high-income urban districts.

70. Which quality of a counselor refers to the ability to understand another person's experience?
(A) Sympathy
(B) Empathy
(C) Apathy
(D) Telepathy

71. In directive counseling, who is primarily responsible for the direction of the session?
(A) The client
(B) The client's family
(C) The community head
(D) The counselor

72. Individual health is characterized by:
(A) An individual's physical and mental state
(B) Improving the water supply of a city
(C) National vaccination policies
(D) Mass media health campaigns

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73. Which of the following is NOT a characteristic of Primary Health Care?
(A) Universal physical and financial accessibility
(B) Community participation in implementation
(C) Exclusivity for high-income social groups
(D) Affordability of essential medical services

74. Group counseling is particularly advantageous because:
(A) It provides social support and shared learning.
(B) It accelerates recovery over individual sessions.
(C) It removes the requirement for a professional.
(D) It guarantees an absolute cure for participants.

75. Which counseling type focuses on helping individuals with disabilities achieve their goals?
(A) Grief counseling
(B) Career counseling
(C) Directive counseling
(D) Rehabilitation counseling

76. The nature of counseling is empowering because:
(A) The counselor makes all clinical decisions.
(B) It helps clients develop self-efficacy skills.
(C) It gives the counselor power over finances.
(D) It forces the client to follow new lifestyles.

77. Environmental health as a component of community health includes:
(A) Purely psychological counseling
(B) Only genetic engineering
(C) Waste management and sanitation
(D) Individual financial planning

78. Which of the following is a competency-based role of an ASHA worker?
(A) Prescribing advanced hospital chemotherapy
(B) Performing complex cardiac bypass surgery
(C) Designing national health insurance policies
(D) Conducting meetings on maternal nutrition

grassroots medical care rather than just advanced hospital treatments.

17. (B) The counselor takes an active role in diagnosing and suggesting solutions.
Directive counseling is an approach where the counselor plays a prominent and active role in the session. The practitioner focuses on identifying the specific problem, diagnosing the underlying issues, and proposing concrete solutions or behavioral changes. This method is often chosen when a client requires clear guidance, structured advice, or a faster resolution to a situational crisis or practical concern.

18. (B) 1 and 2 only
Environmental health is a vital component of community health that focuses on external physical, chemical, and biological factors affecting human well-being. It includes the study and management of water quality, sanitation, and waste disposal to prevent disease. Because safe environmental conditions are essential for population health, these factors are never excluded but are instead prioritized in comprehensive health programs.

19. (C) Formulation of national-level health budgets
Auxiliary Nurse Midwives are frontline health workers who operate primarily at the village or sub-center level. Their core responsibilities include maternal and child health services, routine immunization, and community health education. They do not possess the administrative authority to formulate national-level health budgets, which is a macro-level function typically handled by senior government officials and policy makers within the health ministry.

20. (A) Both A and R are true and R is the correct explanation of A.
Counseling often faces significant challenges in various societies due to the social stigma surrounding mental health. Cultural beliefs and values deeply influence how individuals perceive psychological issues and determine their willingness to seek professional help. Understanding these cultural factors is essential for counselors to provide effective support and to develop strategies that respect the client's background while addressing their needs.

21. (C) Rehabilitative role
The rehabilitative role in health focuses on helping individuals regain their functional abilities after an injury or illness. In the case of limb loss, rehabilitation involves physical therapy, vocational training, and psychological support to help the person adapt to their new lifestyle. This role is essential for improving the quality of life and independence of individuals who have suffered permanent physical impairments.

22. (A) 3-1-4-2
The logical order of the counseling process starts with establishing rapport to build trust. This is followed by an assessment of the problem to understand the client's needs. Once the issues are identified, the counselor implements an intervention using appropriate therapeutic strategies. The process concludes with the termination of the session or relationship after the goals have been successfully addressed.

23. (D) Imposing personal moral codes on clients
Effective counselors must maintain professional boundaries and avoid imposing their own personal moral codes or religious beliefs on their clients. Instead, they demonstrate self-awareness, flexibility, and strong communication skills. A non-judgmental approach ensures that the client feels respected and safe to explore their own values, which is essential for fostering self-growth and making independent, personally meaningful life decisions.

24. (A) Statement I is correct, Statement II is incorrect.
Group counseling provides a unique therapeutic environment where members can share experiences and realize that their struggles are common to others. While this social support is highly beneficial, group counseling is not always more effective than individual counseling for every disorder. The choice between individual or group formats depends on the client's specific psychological needs, personality, and the nature of their concerns.

25. (C) P-3, Q-1, R-2, S-4
Career counseling helps individuals make vocational choices, while family counseling focuses on improving communication within a household unit. Eclectic counseling is

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(B) Preference for individualistic choices only
(C) Absolute lack of spiritual beliefs in groups
(D) Rejection of all traditional healing habits

91. Which of the following is an EXCEPTION to the role of community health?
(A) Systematic prevention of various diseases
(B) Promotion of health and wellness concepts
(C) Rehabilitation of disabled community members
(D) Maximization of counselor commercial profits

92. What is the most appropriate description of rapport?
(A) State of conflict between professional parties
(B) Relationship of mutual trust and understanding
(C) Financial agreement between counselor and client
(D) Legal contract for the provision of services

93. Which of the following is a correct pair of community types and health challenges?
(A) Urban – Scarcity of hospitals
(B) Tribal – Over-exposure to modern technology
(C) Rural – Lack of specialized tertiary care
(D) Community – Purely individual genetic issues

94. Given below are two statements regarding the interdependence of health:
Statement I: Community health and individual health are interdependent.
Statement II: An individual's health has no impact on the spread of communicable diseases in a community.
(A) Statement I is correct, Statement II is incorrect.
(B) Statement I is incorrect, Statement II is correct.
(C) Both are correct.
(D) Both are incorrect.

95. In the following question, a statement of Assertion (A) is followed by a statement of Reason (R). Choose the correct option:
Assertion (A): Directive counseling is often faster than non-directive counseling.
Reason (R): The counselor takes the lead in identifying problems and providing solutions.
(A) Both A and R are true and R is the correct explanation of A.
(B) Both A and R are true but R is not the correct explanation of A.
(C) A is true but R is false.
(D) A is false but R is true.

96. Which of the following is a quality of an effective counselor?
(A) Ability to prescribe high-dose antibiotics
(B) High level of self-awareness and empathy
(C) Competency in clinical pathology and imaging
(D) Expertise in corporate financial auditing

97. The Alma Ata declaration of 1978 is most famously linked with:
(A) Surgery for All through Urban Hospitals
(B) Health for All through Primary Health Care
(C) Wealth for All through Industrialization
(D) Education for All through Digital Media

98. Which of the following is NOT a stage in the individual counseling process?
(A) Mass political campaigning
(B) Rapport building
(C) Assessment
(D) Intervention

99. Which of the following is an INCORRECT statement about career counseling?
(A) It helps in understanding one's own personality.
(B) It involves exploring various job markets.
(C) It is only for unemployed individuals.
(D) It helps in setting realistic professional goals.

100. Which type of counseling is most appropriate for a person struggling with the psychological effects of a chronic physical illness?
(A) Career counseling
(B) Tribal counseling
(C) Directive advice-giving
(D) Rehabilitation counseling

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79. Given below are two statements regarding community health education:
Statement I: Community health education aims to increase health literacy.
Statement II: Methods like role-plays and posters are ineffective in rural areas.
(A) Statement I is correct, Statement II is incorrect.
(B) Statement I is incorrect, Statement II is correct.
(C) Both statements are correct.
(D) Both statements are incorrect.

80. Identify the INCORRECT pair of counseling types:
(A) Family Counseling – Dealing with sibling rivalry
(B) Eclectic Counseling – Using only one rigid method
(C) Career Counseling – Discussing job satisfaction
(D) Grief Counseling – Helping with the loss of a loved one

81. Which stage of counseling involves defining the goals of the relationship?
(A) Termination
(B) Assessment and goal setting
(C) Initial rapport building
(D) Pre-session administrative work

82. In the context of urban community health, which factor is a major concern?
(A) High population density and pollution levels
(B) Absolute lack of available medical facilities
(C) Excessive use of local forest-based medicine
(D) Complete absence of regional human migration

83. Which approach to counseling was pioneered by Carl Rogers?
(A) Directive
(B) Authoritarian
(C) Non-directive
(D) Purely medical

84. What is the most appropriate role of a counselor during the intervention stage?
(A) Establishing trust with the client
(B) Ending the session without notice
(C) Assessing childhood for the first time
(D) Applying strategies to help clients change

85. Which of the following is a correct statement about the distinction between Public Health and Community Health?
(A) Public health is a subset of community health.
(B) Public health only focuses on individual surgery.
(C) Community health applies public health locally.
(D) Community health excludes the role of government.

86. A preventive role in community health would be:
(A) Providing physical therapy to a stroke patient
(B) Administering polio drops to children
(C) Performing an emergency appendectomy
(D) Managing a hospice for terminal patients

87. Which of the following is NOT a principle of professional counseling?
(A) Empathy
(B) Confidentiality
(C) Non-judgmental attitude
(D) Subjective bias

88. Community health workers like ANMs are essential because:
(A) They are the first contact in health systems.
(B) They replace the need for specialized doctors.
(C) They work only in international research labs.
(D) They are involved in urban corporate marketing.

89. Which counseling type is most relevant for a student confused about choosing between science and arts?
(A) Rehabilitative counseling
(B) Family counseling
(C) Career counseling
(D) Grief counseling

90. Which of the following is a cultural factor often considered in counseling?
(A) Significant role of extended family units

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to provide basic health guidance and support, they are not authorized medical professionals and cannot independently prescribe long-term psychiatric medications or other specialized clinical drug treatments.

9. (C) Localized group demonstrations
Addressing localized issues like sanitation requires direct engagement with the affected population through group demonstrations. This method allows for hands-on learning and immediate feedback, making it more effective than broad-scale television broadcasts or technical medical journals. Localized interventions ensure that health messages are culturally relevant and practical, encouraging community members to adopt better hygiene practices within their specific environmental context.

10. (A) Both A and R are true and R is the correct explanation of A.
Community participation is vital for the long-term sustainability of health programs because it fosters a sense of ownership among local people. When individuals are involved in the planning and implementation stages, programs are better aligned with their unique cultural needs and social context. This localized relevance ensures higher acceptance rates and more effective health outcomes compared to top-down, non-participatory approaches.

11. (D) Non-directive counseling
Non-directive counseling, also known as client-centered therapy, focuses on empowering clients to find their own solutions. The counselor acts as a facilitator rather than an authority figure, avoiding direct orders or advice. By creating an environment of empathy and unconditional positive regard, the counselor helps the client explore their internal strengths and capabilities to resolve personal challenges and achieve self-growth independently.

12. (A) 3-2-1-4
The counseling process begins with building rapport to establish trust between the counselor and the client. Once a relationship is formed, the assessment phase follows to identify the client's core issues. This leads to the intervention stage, where specific therapeutic strategies are applied to facilitate change. Finally, the process concludes with termination, which involves summarizing progress and ending the professional relationship formally.

13. (C) Helping individuals cope with loss
Grief counseling is a specialized field aimed at assisting individuals who are experiencing the emotional pain associated with the loss of a loved one or a significant life change. It provides a supportive environment for expressing sorrow and processing the stages of mourning. Unlike career or rehabilitative counseling, its primary focus is on emotional healing and adapting to life after a bereavement.

14. (D) A competency-based community health intervention
Organizing a workshop on water filtration in response to water-borne diseases is a competency-based intervention because it equips community members with the skills needed to solve a specific health problem. This approach empowers people to take preventive action and improve their own environmental conditions. It goes beyond curative care by addressing the root cause of illness through education and practical skill development.

15. (A) P-3, Q-2, R-1, S-4
Empathy involves understanding the client's internal world from their unique perspective, while acceptance entails maintaining a non-judgmental attitude. Confidentiality is the ethical principle of protecting the client's private information from unauthorized disclosure. Rapport is the essential initial step of establishing a harmonious and trusting relationship. Together, these principles form the foundation of an effective therapeutic alliance and ensure a safe environment.

16. (B) It declared health as a fundamental human right.
The Alma Ata Declaration of 1978 is a landmark international agreement that identified Primary Health Care as the key to achieving global health. It emphasized that health is a fundamental human right and prioritized essential services, community participation, and universal accessibility. This historical document shifted the focus of international health policy toward

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family unit
(D) Social stigma regarding professional mental health

53. Non-directive counseling is also known as:
(A) Counselor-centered counseling
(B) Problem-centered counseling
(C) Client-centered counseling
(D) Society-centered counseling

54. Which of the following is an INCORRECT pair regarding health types?
(A) Rural – Agricultural hazards
(B) Tribal – High-tech tertiary hospitals
(C) Urban – Industrial pollution
(D) Community – Collective well-being

55. In the counseling process, assessment primarily involves:
(A) Building a friendly rapport with the client
(B) Concluding the professional relationship
(C) Providing the client with a final solution
(D) Gathering data to understand the problem

56. Which of the following best represents the curative role of a community health center?
(A) Treating a patient with malaria
(B) Organizing a yoga camp
(C) Distributing pamphlets on handwashing
(D) Improving the local drainage system

57. Which principle of counseling ensures that the client's information is not shared with others?
(A) Empathy
(B) Acceptance
(C) Confidentiality
(D) Congruence

58. Identify the correct statement about the role of community health workers:
(A) ANMs provide essential grassroots-level delivery.
(B) ASHA workers are based only in urban private clinics.
(C) Health workers exclude community members from choice.
(D) Community workers focus exclusively on rehabilitation.

59. What is eclectic counseling?
(A) A synthesis of various counseling models
(B) A method that excludes all dialogue
(C) A type of medical surgery
(D) A synthesis of various counseling models

60. Which is a fact about Primary Health Care?
(A) It is reserved for high-income urban populations.
(B) It was the focus of the Alma Ata Declaration.
(C) It is the final level of specialized clinical care.
(D) It excludes maternal and child health services.

61. Which role of community health focuses on providing information to change people's behavior for better health?
(A) Curative role
(B) Rehabilitative role
(C) Promotive role
(D) Diagnostic role

62. Acceptance in counseling means:
(A) Agreeing with everything the client does
(B) Judging the client's past mistakes
(C) Forcing the client to change their beliefs
(D) Respecting the client as they are

63. Which type of community health specifically deals with health issues arising from overcrowding and industrialization?
(A) Urban community health
(B) Rural community health
(C) Tribal community health
(D) Remote community health

64. What is the major difference between counseling and advice-giving?
(A) Counseling is free while advice-giving involves fees.
(B) Counseling is a formal professional process.
(C) Advice-giving requires state licensing to perform.
(D) Counseling is always conducted in group settings.

65. Which of the following is an INCORRECT statement about community participation?
(A) It increases the sense of ownership in health programs.
(B) It is a passive process where people just listen to experts.

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characterized by the synthesis of various theoretical approaches tailored to the client's needs. Rehabilitative counseling assists people with disabilities in achieving their highest level of functioning. Each type addresses a distinct aspect of personal, professional, or social well-being.

26. (A) Rehabilitative – Initial spread of disease
The rehabilitative role focuses on restoring function and improving quality of life after a disease or injury has already occurred, rather than the initial spread of disease. Preventive roles involve vaccinations to stop illness onset, while promotive roles use education to encourage healthy lifestyles. Curative roles focus on the diagnosis and medical treatment of existing conditions to restore health to patients.

27. (D) Eclectic counseling
Eclectic counseling is a flexible approach that integrates diverse therapeutic techniques from various schools of thought. Instead of adhering strictly to one model, the counselor selects strategies that best fit the specific needs and goals of the client. This customized method allows for greater versatility in treatment, ensuring that the intervention is tailored to the individual's unique psychological and situational requirements.

28. (A) 1 and 2 only
Community mental health emphasizes providing services within the local community rather than in large psychiatric institutions. It focuses on preventing mental disorders and promoting well-being across the entire population. Social determinants, such as poverty, housing, and social support, are never ignored because they play a fundamental role in shaping the mental health outcomes of individuals and the community as a whole.

29. (C) Building rapport
Building rapport is the most appropriate initial step in the counseling process as it creates a foundation of trust and mutual understanding. Without a positive relationship, the client may be reluctant to share personal information, hindering the assessment and intervention stages. Establishing a safe and supportive environment allows the counselor to effectively move forward with identifying and addressing the client's concerns.

30. (A) Both A and R are true and R is the correct explanation of A.
Non-directive counseling is also known as client-centered therapy because it prioritizes the client's perspective and autonomy. Developed by Carl Rogers, this approach is based on the belief that individuals possess an inherent self-actualizing tendency to grow and heal. The counselor provides a supportive environment through empathy and unconditional positive regard, allowing the client to take the lead in their personal development.

31. (A) The local community itself
Community health workers like ASHA are primarily selected from the local community to ensure they are familiar with the residents and their cultural context. Being a community member fosters trust and facilitates better communication between the health system and the people. This local connection is essential for effectively promoting health initiatives, as workers understand the specific challenges and needs of their neighbors.

32. (B) Promoting healthy lifestyles and nutrition
The promotive role of community health focuses on enhancing well-being and preventing illness by encouraging healthy behaviors and balanced nutrition. This involves educating the public on the benefits of exercise, proper diet, and hygiene. Unlike curative care, which treats existing diseases, or rehabilitative care, which restores lost function, promotive health empowers individuals to take proactive steps to maintain their long-term health.

33. (B) Counseling empowers clients to make their own decisions.
Professional counseling is fundamentally different from simple advice-giving. While advice involves telling someone what to do, counseling is a therapeutic process that empowers clients to explore their options and make their own informed decisions. It helps individuals develop critical thinking and problem-solving skills, fostering long-term independence and personal growth rather than creating a dependency on the counselor's personal opinions or directions.

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34. (A) Empathy – Taking on client feelings as a personal burden
Empathy in counseling involves understanding and sharing the client's feelings from their perspective without taking those feelings on as a personal burden. A counselor must remain objective to provide effective professional support. Other core principles include acceptance, which involves respecting the client's inherent worth, and genuineness, which requires the counselor to be authentic and transparent within the therapeutic relationship.

35. (C) P-2, Q-1, R-3, S-4
Rural health focuses on providing primary medical care in village settings, whereas urban health addresses challenges like slum populations and migration. Tribal health is specifically concerned with the well-being of indigenous groups and their unique environmental contexts. Public health operates at a macro level, involving national policies and administration to protect the health of the entire population through legislation and infrastructure.

36. (D) Career counseling
Career counseling is the process of helping individuals explore vocational paths that align with their personal interests, aptitudes, and personality traits. It provides guidance on educational requirements and job market trends to help students or professionals make informed decisions. This specialized counseling helps individuals set realistic goals and develop strategies to achieve success and satisfaction in their chosen professional fields.

37. (C) Secret individual surveillance
Community health education utilizes open and participatory methods such as roleplays, posters, and public lectures to disseminate information and encourage healthy behaviors. Secret individual surveillance is not a recognized method of health education, as it violates privacy and lacks the transparent, collaborative nature required for effective community engagement. Education should empower people through shared knowledge rather than monitoring them without their consent.

38. (A) 1 and 2 only
The curative role of health services focuses on diagnosing and treating individuals who are already suffering from an illness or injury. It includes medical interventions, surgical procedures, and pharmaceutical treatments designed to restore health. While it is a vital part of healthcare, it is not the only component of community health, which also encompasses preventive, promotive, and rehabilitative roles for a balanced approach.

39. (B) Statement I is incorrect, Statement II is correct.
Individual health is never purely a personal matter because it directly impacts the broader community, especially regarding the transmission of infectious diseases. The collective health of a community is essentially the sum of the health statuses of its individual members. Therefore, personal health choices and well-being contribute significantly to the overall stability, productivity, and safety of the entire population within a region.

40. (A) Both A and R are true and R is the correct explanation of A.
Environmental health is an essential part of community health because the physical surroundings directly impact human well-being. Factors such as safe drinking water, clean air, and effective waste disposal systems are critical for preventing the spread of diseases and promoting a high quality of life. When these environmental conditions are maintained, the overall health of the population improves, reducing the burden of illness.

41. (C) Directive counseling
Directive counseling is a structured approach where the counselor takes an active role in guiding the client toward specific behavioral changes or solutions. The practitioner identifies the problem, provides expert advice, and suggests specific actions for the client to follow. This method is particularly useful in crisis situations or when the client requires clear and immediate guidance to resolve a pressing personal issue.

42. (A) It provides social support and shared learning.
Group counseling offers a supportive environment where participants can share their experiences

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and learn from one another. This collective approach helps individuals realize they are not alone in their struggles, which can be highly therapeutic. It is conducted by professional staff and is a recognized, legal practice worldwide. Participants do not necessarily need the same diagnosis to benefit from the social dynamics.

43. (D) It is a high-cost specialized service.
Primary Health Care is designed to be a universally accessible and affordable service that serves as the first level of contact for individuals within the health system. It was a major focus of the Alma Ata Declaration and emphasizes community participation. Unlike high-cost specialized services, Primary Health Care prioritizes essential health needs, prevention, and health promotion for all members of the society.

44. (B) Grief counseling
Grief counseling is a specialized therapeutic process focused on helping individuals cope with the emotional and psychological pain following a death or significant loss. It provides a safe space for people to express their feelings and navigate the stages of mourning. The goal is to support the individual in processing their sorrow and eventually finding healthy ways to adapt to their new reality.

45. (C) P-3, Q-1, R-2, S-4
Rapport building is the initial phase focused on establishing trust and comfort between the client and counselor. Assessment follows as the counselor gathers detailed information about the client's history and current concerns. During the intervention stage, specific therapeutic techniques are applied to address the identified issues. Finally, termination marks the formal conclusion of the counseling relationship once the therapeutic goals have been met.

46. (D) Dynamic and multidisciplinary
Community health is inherently dynamic and multidisciplinary, as it constantly evolves in response to new health challenges and social changes. It integrates knowledge from various fields, including medicine, sociology, environmental science, and psychology, to address the complex needs of populations. This broad approach ensures that health strategies are comprehensive, addressing not just biological factors but also the social and economic determinants of well-being.

47. (A) Cultural competency in counseling
Cultural competency in counseling refers to the counselor's ability to understand and respect the diverse cultural backgrounds and family structures of their clients. By being sensitive to dynamics like joint family systems, the counselor can provide more relevant and effective support. This awareness helps in building trust and ensures that the therapeutic process aligns with the client's values, beliefs, and social context.

48. (A) 1 and 2 only
Family counseling treats the entire family as a functional unit or system, focusing on the interactions and communication patterns between all members. Its primary goal is to improve interpersonal relationships and resolve conflicts that affect the whole household. It does not focus exclusively on a single person, such as a child, but rather addresses the collective dynamics that influence the well-being of everyone involved.

49. (B) Alma Ata – Primary Health Care
The Alma Ata Declaration of 1978 is a landmark international agreement that identified Primary Health Care as the key to achieving global health. It emphasized that health is a fundamental human right and prioritized essential services, community participation, and universal accessibility. This historical document shifted the focus of international health policy toward grassroots medical care and social equity rather than just advanced hospital treatments.

50. (A) Both A and R are true and R is the correct explanation of A.
Eclectic counseling is characterized by its flexibility, as it does not rely on a single theoretical framework. By synthesizing the most effective techniques from different counseling models, practitioners can provide a more comprehensive and personalized treatment plan. This adaptability allows counselors to address the complex and varying needs of clients more effectively than a rigid, one-size-fits-all approach to psychological therapy and support.

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between the counselor and the client. This stage occurs when the therapeutic goals have been met or when it is decided that the counseling is no longer necessary. It involves summarizing the progress made, addressing any remaining concerns, and preparing the client to maintain their growth independently in the future.

69. (C) It focuses on prevention and community support.
Community mental health is an approach that prioritizes the prevention of mental disorders and the provision of support services within the local community. It moves away from long-term institutionalization in large psychiatric hospitals toward accessible, home-based, or community-based care. This model emphasizes early intervention, social integration, and addressing the environmental factors that influence a person's psychological well-being and overall mental health.

70. (B) Empathy
Empathy is the foundational counseling quality that involves the counselor's ability to truly understand and experience the client's feelings from their perspective. It differs from sympathy, as it requires deeper emotional resonance without becoming personally overwhelmed. This skill helps build a strong therapeutic alliance and fosters a safe environment where the client feels deeply heard, respected, and validated during the entire counseling process.

71. (D) The counselor
In directive counseling, the counselor takes primary responsibility for the direction and structure of the session. The practitioner actively identifies the client's problems, conducts the diagnosis, and proposes specific solutions or behavioral strategies. This approach is often used when a client needs clear guidance or when the goal is to resolve a specific issue quickly through expert advice and professional intervention.

72. (A) An individual's physical and mental state
Individual health is defined by the physical, mental, and social well-being of a single person. It focuses on the personal medical history, biological characteristics, and clinical treatment needed for that individual. While individual health is distinct from community health, the two are closely linked, as the health status of each person collectively contributes to the overall health and productivity of the entire community.

73. (C) Exclusivity for high-income social groups
Primary Health Care is based on the principle of social equity and is intended to be universally accessible to all people, regardless of their income level. It focuses on providing essential healthcare that is scientifically sound and socially acceptable. Exclusivity for high-income groups contradicts the core philosophy of Primary Health Care, which aims to reduce health disparities and ensure that basic medical services reach everyone.

74. (A) It provides social support and shared learning.
Group counseling is particularly advantageous because it offers participants a sense of social support and opportunities for shared learning. Being part of a group allows individuals to see that others face similar challenges, which can reduce feelings of isolation. This dynamic environment encourages feedback from peers and the development of interpersonal skills, making it a powerful tool for personal growth and emotional healing.

75. (D) Rehabilitation counseling
Rehabilitation counseling is a specialized field that focuses on helping individuals with physical, mental, or developmental disabilities achieve their personal and professional goals. Counselors in this field assist clients in overcoming barriers to independence and improving their quality of life. The process involves physical therapy, vocational training, and psychological support tailored to the specific needs and functional capabilities of each person with a disability.

76. (B) It helps clients develop self-efficacy skills.
Counseling is empowering because it helps clients develop self-efficacy and the skills needed to manage their own lives. Rather than the counselor making all the decisions, the therapeutic process encourages individuals to explore their options and take responsibility for their choices. This focus on personal agency and problem-solving fosters long-term independence and increases the client's confidence in their ability to handle future challenges.

of human problems. By drawing upon various behavioral, cognitive, and humanistic techniques, the counselor can adapt their intervention to the specific personality and situational challenges of each individual client.

60. (B) It was the focus of the Alma Ata Declaration.
Primary Health Care was the central theme of the 1978 Alma Ata Declaration, which identified it as the essential strategy for achieving global health goals. It is designed to be universally accessible, affordable, and culturally appropriate for all people, regardless of income. Primary health services include essential medical care, maternal health, and disease prevention, serving as the foundation of any effective health system.

61. (C) Promotive role
The promotive role in community health focuses on providing information and education to encourage people to adopt healthier lifestyles and behaviors. By increasing health literacy, this role empowers individuals to take charge of their own well-being and prevent future illnesses. This proactive approach includes initiatives like nutrition counseling, exercise programs, and public health campaigns aimed at improving the overall health status of the population.

62. (D) Respecting the client as they are
Acceptance in counseling involves respecting the client's inherent worth and dignity, regardless of their past actions or current beliefs. It is a non-judgmental attitude that allows the client to feel safe and understood within the therapeutic relationship. This does not mean the counselor must agree with everything the client does, but rather that they value the person as an individual capable of change.

63. (A) Urban community health
Urban community health specifically addresses the unique challenges posed by high population density, industrialization, and overcrowding. These factors often lead to increased pollution, inadequate housing, and the rapid spread of infectious diseases in city settings. Health programs in urban areas must focus on environmental management, sanitation, and providing accessible medical care to diverse and often marginalized populations living in slums or industrial zones.

64. (B) Counseling is a formal professional process.
The major difference between counseling and advice-giving is that counseling is a formal, professional process grounded in psychological theories and ethical standards. Counselors undergo specialized training to facilitate a client's self-exploration and decision-making. Advice-giving, on the other hand, is often an informal exchange where one person tells another what to do based on personal opinions, lacking the structured, therapeutic framework of professional counseling.

65. (B) It is a passive process where people just listen to experts.
Community participation is an active process where local people are involved in the planning, implementation, and evaluation of health programs. It is not a passive activity; instead, it requires engagement and collaboration between residents and health professionals. This involvement ensures that health initiatives are culturally appropriate and increases the community's sense of ownership, which is essential for the long-term success of Primary Health Care.

66. (A) Being authentic and transparent
Genuineness in counseling refers to the counselor's ability to be authentic, transparent, and real within the therapeutic relationship. This quality, also known as congruence, helps build trust as the client perceives the counselor as a sincere person rather than just a professional playing a role. By being genuine, the counselor creates a safe and honest environment that encourages the client to be open.

67. (C) Geographic isolation from health services
A significant challenge for tribal communities is their geographic isolation, which often limits their access to modern healthcare services and facilities. Many tribal groups live in remote forest areas or hilly terrains where road connectivity and medical infrastructure are poor. This isolation can lead to delayed treatment and a higher reliance on traditional medicine, making the delivery of formal healthcare services particularly difficult.

68. (D) The end of the professional relationship
The termination phase in counseling marks the formal conclusion of the professional relationship

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CHAPTER 27
Yoga and Health

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1. The word 'Yoga' is derived from the Sanskrit root 'Yuj'. What is its primary literal meaning?
(A) Separation
(B) Union
(C) Movement
(D) Silence

2. Match the items in List I with those in List II and select the correct answer using the codes given below:
List I: (Yoga Concept)
P. Yama
Q. Niyama
R. Asana
S. Pranayama
List II: (Definition)
1. Physical postures
2. Breath control
3. Ethical restraints
4. Personal observances
Codes:
(A) P-3, Q-4, R-1, S-2
(B) P-4, Q-3, R-2, S-1
(C) P-1, Q-2, R-3, S-4
(D) P-2, Q-1, R-4, S-3

3. In the history of Yoga development, in which period were the earliest references to yoga-like practices found?
(A) Modern Period
(B) Classical Period
(C) Vedic Period
(D) Post-Classical Period

4. Read the following statements regarding Patanjali's Yoga Sutras and select the correct option:
Statement I: It is considered the foundational text of Classical Yoga.
Statement II: It outlines the path of Ashtanga Yoga, consisting of eight limbs.
(A) Statement I is true, but Statement II is false.
(B) Statement II is true, but Statement I is false.
(C) Both Statement I and Statement II are true.
(D) Both Statement I and Statement II are false.

5. Given below are two statements: one is labelled as Assertion (A) and the other is labelled as Reason (R). Choose the correct answer from the options given below:
Assertion (A): Yoga is effective in reducing physiological stress in the human body.
Reason (R): Regular practice of yoga leads to a decrease in the levels of the hormone cortisol.
(A) Both A and R are true and R is the correct explanation of A.
(B) Both A and R are true but R is not the correct explanation of A.
(C) A is true but R is false.
(D) A is false but R is true.

6. Which limb of Ashtanga Yoga refers specifically to the withdrawal of the senses from external objects?
(A) Dharana
(B) Pratyahara
(C) Dhyana
(D) Samadhi

7. Consider the following components of Yama:
1. Ahimsa (Non-violence)
2. Satya (Truthfulness)
3. Asteya (Non-stealing)
Which of the above statements are included in the ethical restraints defined by Patanjali?
(A) 1 and 2 only
(B) 2 and 3 only
(C) 1 and 3 only
(D) 1, 2, and 3

8. Which of the following is NOT a component of 'Niyama' (personal observances) according to Ashtanga Yoga?
(A) Aparigraha (Non-possessiveness)
(B) Shaucha (Internal and external purity)
(C) Santosha (State of mental contentment)
(D) Tapas (Self-discipline or austerity)

77. (C) Waste management and sanitation
Environmental health, as a core component of community health, includes the management of waste, sanitation, and water quality. These factors are essential for preventing the spread of infectious diseases and maintaining a safe living environment for the population. Proper sanitation and waste disposal reduce environmental hazards, thereby protecting the health of individuals and the community as a whole from various ecological risks.

78. (D) Conducting meetings on maternal nutrition
One of the competency-based roles of an ASHA worker is conducting community meetings to educate residents on topics like maternal nutrition and child health. ASHA workers are trained to provide essential health information and promote healthy behaviors at the grassroots level. They do not perform complex medical procedures or design national policies; instead, they focus on practical, localized health education and facilitating access to basic care.

79. (A) Statement I is correct, Statement II is incorrect.
Community health education is designed to increase health literacy by providing people with the information they need to make healthy choices. Methods like role-plays, posters, and banners are often highly effective in rural areas, as they use visual and interactive communication to overcome literacy barriers. These tools help engage the community and make complex health messages more accessible and easier to understand for everyone.

80. (B) Eclectic Counseling – Using only one rigid method
Eclectic counseling is fundamentally defined by its flexibility and use of multiple therapeutic perspectives. It involves selecting the best tools from various models to suit the client's unique needs. Therefore, describing it as using only one rigid method is incorrect, as that contradicts the core principle of integration and adaptability. Professional counseling relies on this diversity of approaches to facilitate effective healing and growth.

81. (B) Assessment and goal setting
The stage of assessment and goal setting in the counseling process involves identifying the client's specific problems and defining what they hope to achieve through therapy. This phase is crucial for creating a roadmap for future sessions and ensuring that both the counselor and client have a shared understanding of the goals. It provides a structured foundation for the subsequent intervention and evaluation stages.

82. (A) High population density and pollution levels
In the context of urban community health, major concerns include high population density and significant levels of industrial and vehicular pollution. These environmental factors contribute to various respiratory illnesses and the rapid transmission of infectious diseases in crowded city areas. Addressing these urban health challenges requires effective urban planning, improved sanitation, and accessible healthcare services for all residents, particularly those living in impoverished or marginalized neighborhoods.

83. (C) Non-directive
The non-directive approach to counseling, also known as client-centered therapy, was pioneered by Carl Rogers. This method emphasizes the client's autonomy and their innate ability for self-growth. The counselor's role is to provide a supportive environment through empathy, genuineness, and unconditional positive regard, allowing the client to take the lead in exploring their feelings and finding their own solutions to personal life problems.

84. (D) Applying strategies to help clients change
During the intervention stage of the counseling process, the counselor's most appropriate role is applying specific therapeutic strategies to help the client achieve their goals. This phase involves active collaboration between the counselor and client to implement changes in behavior, thoughts, or emotions. It is the core of the therapeutic process where the actual work of addressing the identified problems and fostering growth takes place.

85. (C) Community health applies public health locally.
Community health can be seen as the localized application of public health principles within a

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specific geographic area or group. While public health often involves macro-level policies and national legislation, community health focuses on the direct implementation of these strategies at the local level. It addresses the specific needs and cultural contexts of a community to improve the health outcomes of its individual members.

86. (B) Administering polio drops to children
A preventive role in community health is demonstrated by interventions that stop diseases before they occur, such as administering polio vaccinations to children. This proactive approach reduces the risk of infection and prevents the potential for long-term disability within the population. Other examples of preventive care include regular health screenings, maternal prenatal checkups, and public health education campaigns aimed at reducing specific environmental health risks.

87. (D) Subjective bias
Professional counseling is built on principles such as empathy, confidentiality, and maintaining a non-judgmental attitude. These principles ensure that the counselor provides objective and ethical support to the client. Subjective bias is not a principle of counseling; in fact, counselors are trained to be aware of their own biases to avoid imposing them on their clients, ensuring the therapeutic process remains fair and professional.

88. (A) They are the first contact in health systems.
Community health workers like Auxiliary Nurse Midwives are essential because they often serve as the first point of contact between individuals and the formal healthcare system. Their presence in villages ensures that basic medical services are accessible and that health issues are identified early. By providing essential care at the grassroots level, they play a critical role in improving health outcomes for underserved populations.

89. (C) Career counseling
Career counseling is the most appropriate type of support for a student who is uncertain about their educational or professional path. It helps individuals assess their interests, skills, and personality traits to make informed decisions about their future. By providing information on various career options and the steps needed to achieve them, a career counselor empowers the student to set realistic goals and succeed.

90. (A) Significant role of extended family units
Cultural factors, such as the significant role of extended family units, are often considered in counseling because they deeply influence an individual's worldview and decision-making process. In many cultures, the family's opinions and support are central to a person's well-being. Counselors who are culturally competent recognize these dynamics and incorporate them into the therapeutic process to provide more relevant and effective support.

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91. (D) Maximization of counselor commercial profits
The role of community health is focused on the prevention of disease, the promotion of wellness, and the rehabilitation of individuals within a population. Its primary goal is the collective well-being of the community through accessible and ethical services. The maximization of commercial profits is not a goal or a role of community health, as the field prioritizes public health outcomes over private financial gain.

92. (B) Relationship of mutual trust and understanding
Rapport is a foundational element of the counseling process, described as a relationship of mutual trust, understanding, and comfort between the counselor and the client. Establishing rapport is essential for building a strong therapeutic alliance, as it encourages the client to be open and honest about their concerns. Without this positive connection, it is difficult to effectively conduct assessments or implement successful therapeutic interventions.

93. (C) Rural – Lack of specialized tertiary care
Rural communities often face the significant health challenge of having limited access to specialized tertiary medical care due to geographic isolation and poor infrastructure. While urban areas may have many hospitals, they face issues like overcrowding. Tribal communities may deal with geographic isolation from modern medicine. Identifying these specific challenges is essential for developing targeted health interventions that address the unique needs of each community type.

94. (A) Statement I is correct, Statement II is incorrect.
Community health and individual health are deeply interdependent because the well-being of each person collectively shapes the health of the entire group. An individual's health status, particularly regarding infectious diseases, can significantly impact the spread of illness within the community. Therefore, personal health measures are crucial for maintaining the safety and stability of the population, highlighting the connection between individual and collective wellness.

95. (A) Both A and R are true and R is the correct explanation of A.
Directive counseling is often faster than non-directive counseling because the counselor takes a proactive lead in identifying problems and providing immediate solutions. This structured approach allows for a quicker resolution of situational crises or specific behavioral issues. By giving expert advice and clear directions, the counselor guides the client through a more accelerated process of change compared to the slower, client-led non-directive method.

96. (B) High level of self-awareness and empathy
An effective counselor must possess a high degree of self-awareness and empathy to understand the client's internal world without personal bias. These qualities are essential for building trust and creating a safe therapeutic environment. While medical or financial expertise may be important in other fields, the core competency of a professional counselor lies in their ability to use psychological skills to facilitate personal growth.

97. (B) Health for All through Primary Health Care
The Alma Ata Declaration of 1978 is most famous for its call for "Health for All" through the implementation of Primary Health Care. It emphasized that health services should be universally accessible, affordable, and based on community participation. This global goal shifted the focus of international healthcare toward providing essential services at the grassroots level to reduce health disparities across different nations and communities.

98. (A) Mass political campaigning
The individual counseling process involves structured stages like building rapport, conducting an assessment, and implementing an intervention to address the client's concerns. These stages are focused on the therapeutic relationship and personal growth. Mass political campaigning is not a stage in counseling; instead, it is a separate social and political activity that does not fall within the scope of professional psychological support.

99. (C) It is only for unemployed individuals.
Career counseling is not limited to unemployed individuals; it is also highly beneficial for students, working professionals seeking career changes, and those looking for greater job satisfaction. It involves understanding one's personality, exploring the job market, and setting realistic professional goals. Career counseling provides support at various life stages to help individuals navigate the complexities of vocational development and long-term career planning.

100. (D) Rehabilitation counseling
Rehabilitation counseling is specifically designed to help individuals cope with the psychological, social, and vocational impacts of chronic physical illnesses or disabilities. It aims to empower clients to achieve optimal independence and improve their overall quality of life. This specialized branch of counseling focuses on personal adjustment, adaptive strategies, and the restoration of functional capabilities within the individual's specific environmental and social context.

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51. (C) Restoring optimal functioning in individuals
The primary focus of the rehabilitative role in community health is to restore an individual's physical, psychological, or social functioning following an illness or injury. This involves providing specialized therapies, vocational training, and emotional support to help people regain independence. By focusing on restoration, rehabilitation improves the quality of life for those with disabilities and helps them reintegrate into their communities effectively.

52. (D) Social stigma regarding professional mental health
One of the most significant challenges in the field of counseling is the persistent social stigma surrounding mental health issues. In many cultures, seeking psychological help is viewed as a sign of weakness or shame, which prevents individuals from accessing necessary support. Overcoming this stigma requires ongoing education and advocacy to normalize mental health care as a vital component of overall personal well-being.

53. (C) Client-centered counseling
Non-directive counseling is also known as client-centered therapy because it places the client's needs and perspectives at the heart of the therapeutic process. This approach, pioneered by Carl Rogers, emphasizes the client's ability to lead their own healing journey. The counselor provides a supportive and non-judgmental environment, allowing the individual to explore their feelings and develop their own solutions to life's challenges.

54. (B) Tribal – High-tech tertiary hospitals
Tribal communities often face geographic isolation and have limited access to modern medical infrastructure, let alone high-tech tertiary hospitals. Instead, these groups frequently rely on traditional medicine and local resources. Rural health is often linked with agricultural hazards, while urban health deals with industrial pollution. Community health always focuses on the collective well-being of a population through various localized and accessible interventions.

55. (D) Gathering data to understand the problem
In the counseling process, assessment primarily involves the systematic gathering of data to understand the client's concerns, background, and current situation. This information is crucial for identifying the core problems and establishing clear goals for therapy. By conducting a thorough assessment, the counselor can develop a tailored intervention plan that addresses the specific needs and challenges faced by the individual client.

56. (A) Treating a patient with malaria
The curative role of a community health center is demonstrated by the direct medical treatment of existing illnesses, such as malaria. This role involves diagnosis, prescribing medication, and monitoring the patient's recovery to restore them to health. In contrast, organizing yoga camps or distributing pamphlets are promotive and preventive activities, while improving drainage systems is an environmental health intervention aimed at long-term prevention.

57. (C) Confidentiality
Confidentiality is a fundamental principle of professional counseling that ensures a client's private information is not shared with others without their consent. This ethical standard is essential for building trust and creating a safe space where clients feel comfortable discussing sensitive issues. Protecting client data from unauthorized use is a core responsibility of every counselor, maintaining the integrity of the therapeutic relationship.

58. (A) ANMs provide essential grassroots-level delivery.
Auxiliary Nurse Midwives are vital frontline workers who provide essential health services at the grassroots level, particularly in rural areas. They play a key role in maternal and child health, immunizations, and family planning. Their presence ensures that basic medical care is accessible to underserved populations. Unlike urban specialists, ANMs focus on comprehensive primary care and community-wide engagement to improve overall health outcomes.

59. (D) A synthesis of various counseling models
Eclectic counseling is a multifaceted approach that combines elements from different therapeutic orientations to provide a customized treatment plan. This methodology recognizes that no single theory is sufficient to address the vast diversity

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9. Which of the following pairs is correctly matched regarding the types of Yoga?
(A) Karma Yoga – Path of Knowledge
(B) Jnana Yoga – Path of Action
(C) Bhakti Yoga – Path of Devotion
(D) Raja Yoga – Path of physical and mental mastery

10. Identify the correct chronological sequence of the stages of Yoga development:
(A) Classical – Vedic – Modern
(B) Vedic – Classical – Modern
(C) Modern – Vedic – Classical
(D) Classical – Modern – Vedic

11. What is the primary focus of Hatha Yoga practice?
(A) Logical analysis of various philosophical schools
(B) Devotional singing with rhythmic chanting and prayer
(C) Charitable activities focused on social service
(D) Physical purification and energy balance

12. Match the items in List I with those in List II and select the correct answer using the codes given below:
List I: (Yoga Path)
P. Jnana Yoga
Q. Karma Yoga
R. Bhakti Yoga
S. Raja Yoga
List II: (Core Philosophy)
1. Path of Selfless Action
2. Path of Wisdom/Knowledge
3. Path of Meditation/Control
4. Path of Love/Devotion
Codes:
(A) P-1, Q-2, R-3, S-4
(B) P-2, Q-1, R-4, S-3
(C) P-4, Q-3, R-2, S-1
(D) P-3, Q-4, R-1, S-2

13. Which of the following statements regarding 'Dharana' is correct?
(A) It refers to the physical stretching of the limbs.
(B) It is the final state of absorption or enlightenment.
(C) It is the sixth limb of Ashtanga Yoga focusing on concentration.
(D) It is a breathing technique involving rapid exhalation.

14. What is the most appropriate description of 'Dhyana' in the context of the Ashtanga Yoga system?
(A) Rapid movement between postures
(B) Systematic control of the inhalation process
(C) Following ethical rules in social life
(D) Uninterrupted flow of concentration on an object

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15. Given below are two statements: one is labelled as Assertion (A) and the other is labelled as Reason (R). Choose the correct answer from the options given below:
Assertion (A): Samadhi is considered the pinnacle of the Ashtanga Yoga system.
Reason (R): In Samadhi, the practitioner achieves a state of total absorption where the sense of 'self' merges with the object of meditation.
(A) Both A and R are true and R is the correct explanation of A.
(B) Both A and R are true but R is not the correct explanation of A.
(C) A is true but R is false.
(D) A is false but R is true.

16. Which physiological benefit is most directly associated with the regular practice of Asanas?
(A) Noticeable reduction in overall bone density
(B) Improved muscular flexibility and strength
(C) Significant decrease in total lung capacity
(D) Elevated resting heart rate after exertion

17. Consider the following statements regarding Yoga and health:
1. Yoga can help in the management of Type 2 Diabetes.
2. Yoga is effective in managing Hypertension (high blood pressure).
3. Yoga practice has no impact on chronic disease management.
Which of the statements given above are correct?
(A) 1 and 2 only
(B) 2 and 3 only
(C) 1 and 3 only
(D) 1, 2, and 3

18. Which of the following is an INCORRECT pair regarding Yoga and mental health?
(A) Cortisol – Practice increases production for energy
(B) Anxiety – Practice helps reduce clinical symptoms
(C) Depression – Practice acts as complementary therapy
(D) Sleep Quality – Practice can effectively treat insomnia

19. Which statement best describes the concept of 'Mindfulness' as used in contemporary health?
(A) Deliberately ignoring the past to prioritize future goals
(B) Reaching a trance state where the mind is completely blank
(C) Being intensely aware of what one is sensing and feeling in the moment
(D) Consciously suppressing emotions to maintain a neutral face

20. Match the items in List I with those in List II and select the correct answer using the codes given below:
List I: (Limb of Yoga)
P. Pratyahara
Q. Dharana
R. Dhyana
S. Samadhi
List II: (English Equivalent)
1. Concentration
2. Meditation
3. Sense Withdrawal
4. Absorption
Codes:
(A) P-1, Q-2, R-3, S-4
(B) P-4, Q-3, R-2, S-1
(C) P-2, Q-4, R-1, S-3
(D) P-3, Q-1, R-2, S-4

21. On which date is the International Day of Yoga celebrated annually worldwide?
(A) May 21
(B) June 5
(C) June 21
(D) July 21

22. Read the following statements regarding the Ministry of AYUSH and select the correct option:
Statement I: It is the nodal ministry in India for promoting Yoga and traditional medicine.
Statement II: It was instrumental in the international recognition of Yoga by the United Nations.
(A) Statement I is true, but Statement II is false.
(B) Statement II is true, but Statement I is false.
(C) Both Statement I and Statement II are true.
(D) Both Statement I and Statement II are false.

23. Which of the following is NOT a recognized physical health benefit of Pranayama?
(A) Improved respiratory efficiency
(B) Better regulation of the autonomic nervous system
(C) Reduction in perceived stress levels
(D) Cure for pre-existing genetic conditions

24. Given below are two statements: one is labelled as Assertion (A) and the other is labelled as Reason (R). Choose the correct answer from the options given below:
Assertion (A): Yoga is increasingly integrated into contemporary public health initiatives.
Reason (R): Evidence suggests yoga improves immune function and overall quality of life.
(A) Both A and R are true and R is the correct explanation of A.
(B) Both A and R are true but R is not the correct explanation of A.
(C) A is true but R is false.
(D) A is false but R is true.

25. A person suffering from stiff joints and poor posture is advised to practice Yoga. Which limb of Ashtanga Yoga will provide the most immediate physical relief?
(A) Yama
(B) Niyama
(C) Asana
(D) Pratyahara

26. Which of the following describes 'Karma Yoga' most accurately?
(A) Selfless action without attachment to results
(B) Rigorous exercise for physical body development
(C) Silent meditation performed in remote mountain caves
(D) Sole study of ancient and classical scriptures

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27. Consider the following health benefits of meditation:
1. Improved attention and focus
2. Reduced psychological distress
3. Enhanced emotional regulation

Which of the statements given above are correct?
(A) 1 and 2 only
(B) 2 and 3 only
(C) 1 and 3 only
(D) 1, 2, and 3

28. In the context of Patanjali's Ashtanga Yoga, which limb serves as the bridge between external (Bahiranga) and internal (Antaranga) yoga?
(A) Asana
(B) Pratyahara
(C) Pranayama
(D) Dharana

29. Which of the following statements regarding the Origin of Yoga is INCORRECT?
(A) Its roots are found in ancient Indian civilization.
(B) It evolved as a system for spiritual and physical well-being.
(C) It was originally developed as a competitive sport.
(D) Knowledge was historically passed down through oral traditions.

30. Match the items in List I with those in List II and select the correct answer using the codes given below:
List I: (Yoga Term)
P. Cortisol
Q. AYUSH
R. June 21
S. UN
List II: (Context)
1. International Day of Yoga
2. Stress Hormone
3. Recognition of Yoga
4. Indian Government Ministry

Codes:
(A) P-1, Q-2, R-3, S-4
(B) P-4, Q-3, R-2, S-1
(C) P-3, Q-1, R-4, S-2
(D) P-2, Q-4, R-1, S-3

31. Which of the following is an example of 'Swadhyaya' in the context of the Niyamas?
(A) Self-study and reflection on sacred texts
(B) Physical bathing for purity
(C) Giving up all worldly possessions
(D) Practicing non-violence toward animals

32. Which of the following pairs is INCORRECTLY matched?
(A) Santosha – Emotional contentment
(B) Ishvara Pranidhana – Physical exercise
(C) Shaucha – Mental and physical purity
(D) Tapas – Disciplined effort or austerity

33. Read the following statements regarding Yoga and sleep and select the correct option:
Statement I: Regular yoga practice can help regulate the circadian rhythm.
Statement II: Yoga is found to be ineffective for individuals with chronic insomnia.
(A) Statement I is true, but Statement II is false.
(B) Statement II is true, but Statement I is false.
(C) Both Statement I and Statement II are true.
(D) Both Statement I and Statement II are false.

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34. Given below are two statements: one is labelled as Assertion (A) and the other is labelled as Reason (R). Choose the correct answer from the options given below:
Assertion (A): The practice of Pranayama focuses on the regulation of 'Prana'.
Reason (R): Prana is the vital life force or breath that sustains the body.
(A) Both A and R are true and R is the correct explanation of A.
(B) Both A and R are true but R is not the correct explanation of A.
(C) A is true but R is false.
(D) A is false but R is true.

35. Identify the correct sequence of the last three limbs of Ashtanga Yoga (Samyama):
(A) Dhyana – Dharana – Samadhi
(B) Dharana – Dhyana – Samadhi
(C) Samadhi – Dhyana – Dharana
(D) Dharana – Samadhi – Dhyana

36. Which type of Yoga is often referred to as the 'Path of the Will' or the 'Royal Path', focusing on mind control?
(A) Bhakti Yoga
(B) Karma Yoga
(C) Jnana Yoga

(D) Raja Yoga

37. Consider the following statements regarding the benefits of Yoga on the Cardiovascular system:
1. Reduction in blood pressure
2. Improvement in lipid profile
3. Decrease in heart rate variability

Which of the statements given above are correct?
(A) 1 and 2 only
(B) 2 and 3 only
(C) 1 and 3 only
(D) 1, 2, and 3

38. In which year did the United Nations General Assembly officially recognize June 21 as International Day of Yoga?
(A) 2010
(B) 2012
(C) 2014
(D) 2016

39. Match the items in List I with those in List II and select the correct answer using the codes given below:
List I: (Type of Yoga)
P. Hatha Yoga
Q. Bhakti Yoga
R. Jnana Yoga
S. Karma Yoga
List II: (Key Practice)
1. Intellectual inquiry
2. Shatkarmas and Asanas
3. Service to others
4. Chanting and prayer

Codes:
(A) P-4, Q-2, R-3, S-1
(B) P-1, Q-3, R-2, S-4
(C) P-3, Q-1, R-4, S-2
(D) P-2, Q-4, R-1, S-3

40. Given below are two statements: one is labelled as Assertion (A) and the other is labelled as Reason (R). Choose the correct answer from the options given below:
Assertion (A): Yoga is considered a holistic approach to health.
Reason (R): It addresses physical, mental, and emotional well-being simultaneously.
(A) Both A and R are true and R is the correct explanation of A.
(B) Both A and R are true but R is not the correct explanation of A.
(C) A is true but R is false.
(D) A is false but R is true.

41. Consider the following statements about 'Samadhi':
1. It is the eighth limb of Yoga.
2. It represents the state of complete mental stillness.
3. It can be achieved through the mastery of Dharana and Dhyana.

Which of the statements given above are correct?
(A) 1 and 2 only
(B) 2 and 3 only
(C) 1 and 3 only
(D) 1, 2, and 3

42. Which of the following is a 'Negative' restraint (Yama) that advises against greed or hoarding?
(A) Aparigraha
(B) Ahimsa
(C) Satya
(D) Brahmacharya

43. Which branch of Yoga emphasizes the study of scriptures and the use of the intellect to realize the truth?
(A) Karma Yoga
(B) Bhakti Yoga
(C) Hatha Yoga
(D) Jnana Yoga

44. Which of the following statements regarding 'Asana' is INCORRECT?
(A) It should be steady and comfortable (Sthira-Sukham).
(B) It consists of vigorous aerobic movements.
(C) Its primary purpose in Ashtanga Yoga is to prepare the body for meditation.
(D) It helps in developing physical discipline.

45. What is the main goal of 'Pratyahara' in the yogic process?
(A) To significantly increase the natural appetite for food
(B) To encourage more frequent and active social interaction
(C) To disconnect the mind from sensory distractions
(D) To improve overall eyesight through specific eye exercise

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46. Which hormone's reduction is most commonly cited as proof of Yoga's stress-relieving properties?
(A) Insulin
(B) Melatonin
(C) Estrogen
(D) Cortisol

47. What does the term 'Ahimsa' primarily signify in the context of the Yamas?
(A) Non-violence in thought, word, and deed
(B) Total truthfulness in all forms of speech
(C) Strict practice of celibacy and energy control
(D) Maintaining absolute purity of the physical body

48. Which of the following is a psychological benefit of practicing Mindfulness?
(A) Noticeable increase in personal distractibility
(B) Reduced rumination and repetitive negative thinking
(C) Enhanced levels of ego-centrism and self-focus
(D) Significant increase in the innate fear response

49. 'Brahmacharya', as a Yama, is traditionally interpreted as:
(A) Practice of non-stealing
(B) Right use of energy/continence
(C) Internal/external cleanliness
(D) State of mental contentment

50. Which limb of Yoga involves the regulation of inhalation (Puraka), exhalation (Rechaka), and retention (Kumbhaka)?
(A) Pranayama
(B) Asana
(C) Pratyahara
(D) Dharana

51. Which of the following describes the 'Modern' period of Yoga development?
(A) The time of the composition of the Vedas
(B) The period of Patanjali's Yoga Sutras
(C) The era of global spread and scientific research on Yoga
(D) The era when Hatha Yoga texts were first written

52. In 'Jnana Yoga', what is the primary tool used for spiritual liberation?
(A) Devotional singing
(B) Physical strength
(C) Breath retention
(D) Discernment (Viveka)

53. Which of the following statements about 'Bhakti Yoga' is correct?
(A) It is the path of intellectual analysis.
(B) It prohibits the use of music or chanting.
(C) It emphasizes the transformation of emotions into devotion.
(D) It is intended for residents of monasteries.

54. How does Yoga contribute to immune function?
(A) By increasing chronic inflammation
(B) By reducing stress and improving lymphatic drainage
(C) By replacing the need for all vaccines
(D) By increasing the production of stress hormones

55. Which of the following is a component of 'Shaucha'?
(A) Non-violence
(B) Studying the self
(C) Surrender to a higher power
(D) Mental and physical cleanliness

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56. 'Santosha', one of the Niyamas, refers to which of the following?
(A) Contentment
(B) Discipline
(C) Self-study
(D) Honesty

57. Which limb of Yoga is defined as 'holding the mind on a single point'?
(A) Dhyana
(B) Samadhi
(C) Dharana
(D) Pratyahara

58. What is the specific health focus of the AYUSH Ministry?
(A) Traditional/alternative medicine systems including yoga
(B) Advanced exploration of outer space and research
(C) Implementation of digital information

surrender toward a higher reality or personal deity. This approach utilizes chanting, prayer, and emotional connection as primary tools for spiritual growth. Unlike intellectual or physical paths, it emphasizes the heart's capacity for unconditional love and spiritual dedication.

10. (B) Vedic – Classical – Modern
The historical development of yoga began with early mentions in the ancient scriptures of the Vedic era. It was later systematically codified by Patanjali during the classical period into a structured philosophy. In recent centuries, the modern period emerged, characterized by the global spread of physical practices and the integration of yoga into contemporary health and fitness frameworks.

11. (D) Physical purification and energy balance
This specific branch focuses on preparing the physical body for advanced meditation through rigorous purification techniques. By balancing the opposing energies within the system, practitioners aim to achieve optimal health and vitality. The primary emphasis lies in using physical postures and breathing exercises to clear energetic blockages, ensuring that the body is strong and stable for spiritual pursuits.

12. (B) P-2, Q-1, R-4, S-3
The various paths reflect different human approaches to spiritual realization. The intellectual path utilizes wisdom and inquiry to understand the nature of reality. The path of action emphasizes performing duties without attachment to the results. The devotional path centers on love and surrender. Finally, the royal path focuses on mastering the mind through meditation and systematic internal control.

13. (C) It is the sixth limb of Ashtanga Yoga focusing on concentration.
This sixth stage of the eightfold path involves binding the mind to a single point or object of focus. It serves as the initial step in the internal training process, following the withdrawal of the senses. By maintaining a steady focus, the practitioner trains the mind to resist distractions, which is a necessary prerequisite for entering deeper meditative states.

14. (D) Uninterrupted flow of concentration on an object
Meditation represents the seventh limb of the classical system, characterized by a continuous and uninterrupted flow of awareness toward the object of focus. Unlike the previous stage which requires active effort to maintain concentration, this state becomes more spontaneous and fluid. It signifies a deeper level of mental stillness where the mind remains steady and clear without being distracted.

15. (A) Both A and R are true and R is the correct explanation of A.
The final stage of the eightfold path represents the ultimate goal of spiritual practice. In this state of total absorption, the distinction between the observer and the object of meditation disappears completely. The practitioner experiences a profound sense of unity where the individual ego is transcended. This level of consciousness is considered the peak of the entire yogic journey.

16. (B) Improved muscular flexibility and strength
Regular performance of physical postures directly impacts the musculoskeletal system by stretching and toning various muscle groups. These practices enhance joint mobility and improve the structural alignment of the body. Unlike vigorous aerobic activities, the steady nature of these movements builds functional strength and flexibility, which contributes to better physical endurance and a reduced risk of injury during daily activities.

17. (A) 1 and 2 only
Scientific evidence supports the efficacy of yogic practices in managing several metabolic and cardiovascular conditions. Regular participation helps regulate blood sugar levels in diabetic patients and assists in lowering high blood pressure. By promoting relaxation and improving physiological functions, these techniques serve as valuable complementary therapies. However, they do have a significant impact on managing and mitigating chronic health issues.

18. (A) Cortisol – Practice increases production for energy
Cortisol is a primary stress hormone that typically increases during periods of tension or danger. Contrary to boosting its production, yogic

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72. What is the primary purpose of 'Pranayama' in the context of mental health?
(A) To calm the mind and reduce anxiety
(B) To increase physical weight
(C) To improve vocal singing ability only
(D) To prevent hair loss

73. Which of the following best defines the 'Classical' period of Yoga?
(A) The early pre-Vedic era
(B) The 21st-century fitness movement
(C) Patanjali's systematization of Yoga
(D) The era of the British Raj

74. 'Vijnana' or Knowledge is the central theme of which Yoga?
(A) Jnana
(B) Bhakti
(C) Karma
(D) Hatha

75. Which limb of Yoga involves the use of objects, sounds, or the breath to steady the mind?
(A) Asana
(B) Yama
(C) Niyama
(D) Dharana

76. In contemporary public health, Yoga is categorized as what type of intervention?
(A) Highly invasive surgical intervention
(B) Mind-body medicine/Complementary therapy
(C) Traditional pharmacological treatment
(D) Purely ceremonial or religious ritual

77. Which of the following is a physical benefit of Yoga related to the Respiratory system?
(A) Decreased vital capacity
(B) Shallow breathing patterns
(C) Increased oxygenation of tissues
(D) Increased airway resistance

78. What does 'Union' in Yoga signify on a psychological level?
(A) Permanent separation of the mind and the physical body
(B) Strategic union of several different political parties
(C) Administrative joining of two different physical gyms
(D) Integration of the individual self and consciousness

79. Which of the following is NOT an Ashtanga Yoga limb?
(A) Shatkarma
(B) Yama
(C) Niyama
(D) Samadhi

80. 'Aparigraha' helps a practitioner by:
(A) Developing physical strength
(B) Reducing attachment and greed
(C) Improving memory
(D) Increasing wealth

81. Which yoga practice involves the intentional observation of thoughts without judgment?
(A) Physical Asana practice
(B) Mindfulness Meditation
(C) Shatkarma purification
(D) Tapas discipline

82. Which of the following is a key feature of the 'Vedic' period of Yoga?
(A) Use of Mantras and rituals for focus
(B) Development of modern yoga studios
(C) Focus on complicated physical gymnastics
(D) Rejection of all spiritual ideas

83. Yoga's role in chronic disease management is primarily:
(A) Curative and immediate
(B) Limited to skin diseases
(C) Supportive and lifestyle-based
(D) Only through dietary changes

84. What is the literal meaning of 'Prana'?
(A) Physical Food
(B) Liquid Water
(C) Solid Earth
(D) Life force/Breath

85. Which limb of Yoga refers to the mastery of sitting still for long periods?
(A) Yama
(B) Pratyahara
(C) Asana
(D) Dharana

86. Which of the following is a benefit of Yoga for the elderly?

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(A) Notable reduction in joint flexibility
(B) Improved balance and fall prevention
(C) Increased risk of accidental injury
(D) Development of higher stress levels

87. The term 'Samyama' is a collective term for which three limbs?
(A) Yama, Niyama, Asana
(B) Pranayama, Pratyahara, Dharana
(C) Asana, Pranayama, Pratyahara
(D) Dharana, Dhyana, Samadhi

88. Which of the following is most associated with 'Raja Yoga'?
(A) Mental discipline and meditation
(B) Rigorous physical/manual labour
(C) Uncontrolled emotional outbursts
(D) Complex formal intellectual debates

89. Yoga practice has been shown to improve which of the following mental conditions?
(A) Only physical blindness
(B) Perfect photographic memory
(C) Anxiety and Depression
(D) Chronic clinical insomnia

90. Which of the following is a Niyama?
(A) Swadhyaya
(B) Satya
(C) Ahimsa
(D) Asteya

91. What is the significance of the year 2014 in the context of international Yoga recognition?
(A) The year Yoga was initially invented
(B) Patanjali authored the Yoga Sutras
(C) Hatha Yoga was first introduced
(D) UN declared International Yoga Day

92. 'Rechaka' in Pranayama refers to:
(A) Inhalation
(B) Exhalation
(C) Retention
(D) Suspension

93. Which limb of Yoga deals with our relationship with the external world and others?
(A) Niyama
(B) Dhyana
(C) Yama
(D) Samadhi

94. Which of the following is a characteristic of 'Modern' Yoga?
(A) Complete rejection of Patanjali's Sutras
(B) Total lack of any rhythmic breathing exercises
(C) Practices limited to a specific religious order
(D) Emphasis on health and stress management

95. What is the ultimate goal of the Ashtanga Yoga path?
(A) Samadhi (Self-realization)
(B) Physical beauty
(C) Social status
(D) Intellectual superiority

96. Which part of Yoga deals with 'Personal Discipline'?
(A) Yama
(B) Niyama
(C) Asana
(D) Pratyahara

97. 'Puraka' in Pranayama means:
(A) Exhalation
(B) Inhalation
(C) Holding the breath
(D) Closing the eyes

98. Which of the following is a benefit of Yoga for cardiovascular health?
(A) Reduced resting heart rate
(B) Increased arterial stiffness
(C) Higher levels of LDL cholesterol
(D) Increased risk of stroke

99. The 'origin' of Yoga is traditionally linked to which ancient civilization?
(A) Ancient Mesopotamian region
(B) Classical Mayan civilization
(C) Indus Valley/Ancient Indian
(D) Ancient Greek civilization

100. Which ministry organises the 'Yoga Mahotsav' in India?
(A) Ministry of External Affairs
(B) Ministry of Home Affairs
(C) Ministry of Finance
(D) Ministry of AYUSH

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ANSWERS

1. (B) Union
The Sanskrit root Yuj signifies the act of joining or yoking together. In the context of spiritual practice, this term represents the profound union between the individual self and the universal consciousness. It emphasizes a harmonious integration of the mind, body, and spirit, leading to a state of complete inner balance and holistic well-being.

2. (A) P-3, Q-4, R-1, S-2
These components represent the first four stages of the eightfold path. Ethical restraints provide a moral code for interacting with society. Personal observances focus on individual discipline and internal purity. Physical postures prepare the body for stillness and meditation. Breath control techniques regulate vital energy to calm the mind and enhance overall physiological functions.

3. (C) Vedic Period
The origins of yogic practices are traced back to ancient scriptures composed during the Vedic period. Early hymns and rituals found in the Rig Veda provide the first written evidence of meditative and breath-oriented disciplines. This era established the philosophical foundation upon which subsequent classical systems were built, emphasizing the connection between rituals and internal spiritual growth.

4. (C) Both Statement I and Statement II are true.
This ancient text serves as the definitive guide for the classical system of yoga. It systematically organizes various practices into a logical eight-limbed structure known as Ashtanga. By defining the nature of the mind and providing specific techniques for mental control, it remains the primary philosophical authority for practitioners seeking spiritual liberation and disciplined internal growth throughout history.

5. (A) Both A and R are true and R is the correct explanation of A.
Scientific research confirms that consistent yogic practices significantly lower physiological stress markers in humans. A primary mechanism involves the regulation of the endocrine system, specifically by reducing the production of cortisol. Lowering this stress hormone helps stabilize the nervous system, promotes relaxation, and improves the body's ability to recover from various environmental or psychological stressors effectively.

6. (B) Pratyahara
This fifth stage of the eightfold path involves the conscious withdrawal of the senses from external stimuli. By redirecting the attention inward, the practitioner prevents the mind from being distracted by sights, sounds, or other sensory inputs. This process is essential for achieving the deep concentration and meditative states required for advanced stages of internal spiritual practice.

7. (D) 1, 2, and 3
The ethical restraints of the eightfold path consist of five moral vows designed to harmonize social interactions. Non-violence ensures peace toward all beings. Truthfulness demands honesty in thought and speech. Non-stealing prevents the desire for others' possessions. Together, these principles create a firm moral foundation for spiritual seekers, helping them maintain integrity and peace within their surrounding communities.

8. (A) Aparigraha (Non-possessiveness)
Personal observances include internal and external purity, contentment with current circumstances, and disciplined effort. While these focus on the practitioner's inner life and self-discipline, non-possessiveness belongs to the category of social ethical restraints. Understanding this distinction is crucial because the former group deals with individual character building while the latter governs behavior and interactions with the external world.

9. (C) Bhakti Yoga – Path of Devotion
Different paths of yoga cater to various temperaments and inclinations. The path of devotion focuses on cultivating love and

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technology
(D) Development of sustainable urban infrastructure

59. Which of the following pairs is INCORRECT?
(A) Vedic Yoga – Ritualistic roots
(B) Classical Yoga – Patanjali
(C) Hatha Yoga – Focus on Raja Yoga preparation
(D) Modern Yoga – Strictly limited to India

60. What is the meaning of 'Ishvara Pranidhana' in the Niyamas?
(A) Exceptional physical strength
(B) Surrender to the Higher Reality
(C) Habit of excessive overeating
(D) Practice of absolute silence

61. Which benefit of Yoga is most relevant for a patient with Hypertension?
(A) Improved balance
(B) Enhanced muscle mass
(C) Lowering of systemic blood pressure
(D) Increased competitive spirit

62. What is the main characteristic of 'Dhyana' that distinguishes it from 'Dharana'?
(A) Dhyana involves breath control, whereas Dharana involves posture
(B) Dhyana is the initial limb, whereas Dharana is the penultimate
(C) Dhyana is a physical practice, whereas Dharana is strictly mental
(D) Dhyana is effortless awareness, while Dharana involves effort

63. Which of the following is an ethical restraint regarding 'Satya'?
(A) Commitment to truthfulness
(B) Refraining from theft
(C) Avoiding violence
(D) Practicing cleanliness

64. Yoga practice is associated with an increase in which type of autonomic nervous system activity?
(A) Sympathetic (Fight or Flight)
(B) Parasympathetic (Rest and Digest)
(C) Somatic Nervous System
(D) Central Nervous System exhaustion

65. Which of the following statements about 'Karma Yoga' is TRUE?
(A) It requires one to leave their family and jobs.
(B) It focuses on performing one's duty without ego.
(C) It is the yoga of physical flexibility.
(D) It is only practiced through silent meditation.

66. What is 'Tapas' in the context of Niyamas?
(A) Fiery discipline or austerity
(B) Practice of deep, long sleep
(C) Habit of mental laziness
(D) Act of frequent socializing

67. Which of the following is NOT a limb of Ashtanga Yoga?
(A) Asana
(B) Pranayama
(C) Mudra
(D) Samadhi

68. The practice of 'Yoga Nidra' is most commonly associated with improving which health aspect?
(A) Enhancement of bone strength
(B) Increase in physical running speed
(C) Improvement of auditory hearing ability
(D) Better sleep quality and relaxation

69. Which type of Yoga focuses on the awakening of energy through physical purification?
(A) Jnana Yoga
(B) Bhakti Yoga
(C) Hatha Yoga
(D) Karma Yoga

70. Which of the following statements regarding the benefits of Yoga for Diabetes is correct?
(A) Yoga increases blood sugar levels significantly.
(B) Yoga can help improve insulin sensitivity.
(C) Yoga acts as a primary cure for Type 1 Diabetes.
(D) Yoga has no effect on endocrine health.

71. 'Asteya' as a Yama refers to:
(A) Non-violence
(B) Truthfulness
(C) Purity
(D) Non-stealing

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practices are specifically known for significantly reducing cortisol levels in the bloodstream. This hormonal reduction is a key reason why yoga is effective for managing anxiety and depression, as it helps transition the body into a restorative state.

19. (C) Being intensely aware of what one is sensing and feeling in the moment
This contemporary health concept involves maintaining a non-judgmental awareness of one's thoughts, feelings, and physical sensations in the present moment. Rather than dwelling on the past or worrying about the future, the individual remains fully engaged with their current experience. This practice helps reduce stress and improves emotional regulation by fostering a calm and observant perspective on life events.

20. (D) P-3, Q-1, R-2, S-4
The final four stages of the eightfold path deal with the internal aspects of spiritual training. They begin with the withdrawal of the senses from external distractions, followed by focused concentration on a single object. This leads naturally into a state of sustained meditation, which eventually culminates in total absorption where the practitioner experiences a profound sense of unity.

21. (C) June 21
This global event is observed annually on the summer solstice, which is the longest day of the year in the Northern Hemisphere. The date was chosen due to its historical and cultural significance in various traditions. It serves to raise worldwide awareness about the numerous benefits of practicing yoga and encourages people to adopt a healthier and more balanced lifestyle.

22. (C) Both Statement I and Statement II are true.
This specialized government body in India is responsible for the development and promotion of traditional healthcare systems. It plays a central role in organizing large-scale events and standardized training programs. Furthermore, its diplomatic efforts were crucial in securing international support at the United Nations, leading to the official global recognition of yoga as a significant contribution to human health.

23. (D) Cure for pre-existing genetic conditions
Breath regulation techniques provide numerous physiological advantages, such as enhancing respiratory efficiency and balancing the autonomic nervous system. These practices are also highly effective at reducing psychological stress. However, it is important to recognize that yoga cannot alter DNA or provide a cure for pre-existing genetic conditions. Its benefits are primarily focused on improving functional health and overall lifestyle management.

24. (A) Both A and R are true and R is the correct explanation of A.
Many modern health systems are incorporating yogic practices into their wellness programs due to the mounting evidence of their physiological benefits. Studies demonstrate that these techniques can enhance immune responses and improve the overall quality of life for patients. Because it addresses both physical and mental health, yoga is seen as a cost-effective and accessible tool for large-scale preventive healthcare.

25. (C) Asana
Physical postures are the third limb of the classical system and are specifically designed to improve bodily health. They help in stretching tight muscles, lubricating joints, and correcting postural imbalances. While the other limbs focus on ethics, breath, or mental states, this particular stage provides the most direct and immediate physical intervention for someone struggling with bodily stiffness or poor alignment.

26. (A) Selfless action without attachment to results
This path emphasizes the spiritualization of daily life through the performance of duty without any personal motive. Practitioners focus on serving others and fulfilling their responsibilities while remaining detached from the outcomes of their actions. By letting go of the ego and the desire for reward, one can transform regular work into a form of continuous meditative practice and service.

27. (D) 1, 2, and 3
Consistent meditative practice offers significant psychological advantages by training the mind to remain focused and calm. It enhances the ability to sustain attention on specific tasks

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100. (D) Ministry of AYUSH

This specific government department in India is the primary authority responsible for promoting and developing traditional wellness systems. As part of its mission, it organizes large-scale public events to raise awareness about the benefits of practicing yoga. These celebrations often feature demonstrations and educational sessions, serving as a platform to encourage people from all walks of life to incorporate yoga into their daily routines.

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classical texts. By employing disciplined mental techniques, practitioners aim to achieve self-realization. This path is distinct from those emphasizing devotion, selfless service, or purely intellectual inquiry into the nature of reality.

37. (A) 1 and 2 only
Practicing yoga provides significant benefits for heart health, including the reduction of systemic blood pressure and the improvement of lipid profiles. These changes help lower the risk of heart disease and stroke. While it enhances the balance of the autonomic nervous system, it typically improves heart rate variability rather than decreasing it. A higher variability is generally a sign of a healthier heart.

38. (C) 2014
The formal proposal to establish a global day for yoga was introduced at the United Nations General Assembly. Due to overwhelming international support, the resolution was adopted in late 2014. This milestone marked the first time the international community collectively recognized the practice as a holistic approach to health and well-being, leading to the inaugural celebrations held the following year.

39. (D) P-2, Q-4, R-1, S-3
Different traditions emphasize various techniques to achieve spiritual goals. Physical purification and postures are central to the path of bodily mastery. Chanting and devotional practices define the path of love. Intellectual inquiry and study are the primary tools for the path of wisdom. Finally, selfless service to others is the core practice for those following the path of action.

40. (A) Both A and R are true and R is the correct explanation of A.
Yoga is recognized as a comprehensive health system because it does not limit its focus to the physical body. Instead, it concurrently addresses the mental and emotional dimensions of the human experience. By integrating ethical conduct, physical movement, and breath control, it promotes a state of total well-being. This multifaceted approach ensures that all aspects of an individual's health are harmonized.

41. (D) 1, 2, and 3
As the final stage of the eightfold path, this state represents the culmination of all previous efforts in concentration and meditation. It is characterized by absolute mental stillness and the transcendence of the ego. Achieving this level of absorption requires the successful mastery of focused attention and sustained awareness, ultimately leading to a profound experience of unity and spiritual liberation.

42. (A) Aparigraha
This ethical restraint involves the practice of non-possessiveness and the avoidance of greed. It encourages individuals to live simply and refrain from hoarding material wealth or clinging to unnecessary objects. By cultivating a sense of detachment, practitioners can reduce the mental clutter and anxiety that often stem from the constant desire for more, leading to greater peace and contentment.

43. (D) Jnana Yoga
This specific branch of yoga is designed for those with an intellectual or philosophical temperament. It utilizes the power of the mind and the study of ancient texts to discern the difference between the eternal and the temporary. Through deep inquiry and contemplation, the practitioner seeks to realize the ultimate truth and achieve liberation from ignorance and the cycle of suffering.

44. (B) It consists of vigorous aerobic movements.
In the classical system, physical postures are defined by their steadiness and comfort rather than high-intensity movement. Their primary goal is to prepare the body for the stillness required during meditation. While they do build strength and flexibility, they are not intended to be a form of vigorous aerobic exercise. They focus on maintaining a calm and stable internal environment.

45. (C) To disconnect the mind from sensory distractions
The fifth stage of the eightfold path focuses on gaining mastery over the senses. By consciously turning the attention away from external sights, sounds, and sensations, the practitioner prevents the mind from being scattered. This internal focus is vital because it creates the necessary

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mental space for deeper concentration. It allows the individual to remain undisturbed by the surrounding environment.

46. (D) Cortisol
Scientific studies frequently measure the effectiveness of relaxation techniques by monitoring various hormonal changes. The most significant indicator of reduced stress is a measurable decrease in cortisol, which is the body's primary stress hormone. Regular yogic practice helps to calm the nervous system, leading to lower levels of this hormone. This physiological shift promotes better immune function and emotional stability.

47. (A) Non-violence in thought, word, and deed
This fundamental ethical restraint emphasizes the practice of non-harming toward all living beings. It extends beyond simple physical actions to include one's thoughts and spoken words. By cultivating a state of compassion and kindness, a practitioner avoids creating suffering for themselves or others. This principle forms the moral foundation of the yogic path, promoting peace and harmony in all interactions.

48. (B) Reduced rumination and repetitive negative thinking
Engaging in present-moment awareness has been shown to significantly improve mental health by breaking the cycle of repetitive negative thinking. Individuals who practice these techniques often experience a reduction in rumination, which is a major contributor to anxiety and depression. By observing thoughts without judgment, people can gain a healthier perspective on their internal experiences, leading to improved emotional resilience.

49. (B) Right use of energy/continence
This ethical restraint is traditionally understood as the responsible management and preservation of one's vital energy. While often associated with celibacy in monastic contexts, it more broadly refers to moderation and the right use of physical and mental resources. By avoiding the depletion of energy through sensory overindulgence, practitioners can redirect their focus and vitality toward deeper spiritual and internal pursuits.

50. (A) Pranayama
This fourth stage of the eightfold path involves the systematic control of the breathing process. It consists of three main components: drawing the breath in, holding it, and releasing it. By regulating these phases, practitioners can influence the flow of vital energy throughout the body. These techniques are essential for calming the mind, improving respiratory function, and preparing for advanced meditation.

51. (C) The era of global spread and scientific research on Yoga
The current era of yoga is characterized by its transition from a secretive spiritual tradition to a global wellness phenomenon. This period features widespread scientific research into the health benefits of various practices and their integration into mainstream medicine. It is also marked by the proliferation of numerous diverse styles and the use of technology to share yogic knowledge across the world.

52. (D) Discernment (Viveka)
The path of wisdom relies on the development of sharp intellectual discernment to distinguish between what is permanent and what is fleeting. Practitioners use this critical inquiry to strip away false identifications with the ego and the physical body. By constantly questioning the nature of reality, they aim to realize the ultimate truth, using knowledge as the primary vehicle for liberation.

53. (C) It emphasizes the transformation of emotions into devotion.
This path of devotion is designed to harness the power of human emotions and redirect them toward a higher spiritual goal. Instead of suppressing feelings, practitioners cultivate a deep and personal bond with the divine through love and service. Chanting, singing, and prayer are common methods used to develop this emotional connection, making it an accessible and deeply fulfilling practice.

54. (B) By reducing stress and improving lymphatic drainage
Practicing yoga supports the body's natural defenses by lowering the levels of stress hormones that can suppress the immune system. Additionally, the various physical movements

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and inversions help improve the circulation of lymphatic fluid, which is responsible for removing toxins and waste. These combined effects create a more resilient internal environment, allowing the body to respond more effectively to infections.

55. (D) Mental and physical cleanliness
This personal observance focuses on maintaining purity in all aspects of life. It encompasses physical hygiene, such as keeping the body and the environment clean, as well as mental clarity. By purifying the mind of negative thoughts and emotions, a practitioner creates a stable and clear foundation for spiritual growth. This sense of cleanliness helps in fostering a disciplined and focused life.

56. (A) Contentment
This second personal observance encourages the cultivation of a deep sense of contentment with one's current life situation. It involves accepting the present moment without constantly craving more or feeling dissatisfied. By practicing this internal state of peace, individuals can reduce the mental agitation caused by endless desires and comparisons, leading to a more stable and happy state of mind.

57. (C) Dharana
This sixth limb of the eightfold path is defined as the practice of binding the mind to a particular object or location. Whether focusing on the breath, a visual image, or a sound, the goal is to prevent the attention from wandering. This disciplined concentration serves as the foundation for meditation, as it trains the mind to remain steady and one-pointed.

58. (A) Traditional/alternative medicine systems including yoga
This specialized government department focuses on the systematic development of traditional and non-conventional healthcare systems. Its primary mission is to promote education, research, and standard practices in fields such as Ayurveda, Unani, and Yoga. By integrating these ancient systems into the modern healthcare framework, the ministry aims to provide comprehensive and accessible wellness options for the entire population of the country.

59. (D) Modern Yoga – Strictly limited to India
The historical phases of yoga show how the practice has evolved over thousands of years. While early forms were rooted in ancient rituals and later systematized by classical philosophers, the contemporary era has seen these traditions spread to every corner of the globe. Suggesting that the practice remains confined to its country of origin ignores its massive international popularity and influence today.

60. (B) Surrender to the Higher Reality
This personal observance involves the total surrender of one's ego and actions to a higher power or universal consciousness. It encourages a sense of humility and trust in the greater order of the universe. By letting go of the need for control and the attachment to personal outcomes, the practitioner can achieve a profound sense of inner peace and spiritual connection.

61. (C) Lowering of systemic blood pressure
Individuals with high blood pressure can significantly benefit from consistent yogic practices, particularly those involving slow breathing and relaxation. These techniques help to activate the body's rest-and-digest system, which naturally reduces the strain on the cardiovascular system. By lowering systemic blood pressure, yoga serves as a valuable tool for managing this condition and reducing the risk of associated long-term health complications.

62. (D) Dhyana is effortless awareness, while Dharana involves effort
While both limbs deal with the mind's focus, they represent different levels of intensity. The earlier stage requires active, conscious effort to bring the mind back to the object of concentration whenever it wanders. In contrast, the subsequent stage is characterized by a spontaneous and uninterrupted flow of awareness. It is a state of effortless presence where the mind remains naturally steady.

63. (A) Commitment to truthfulness
This second ethical restraint demands a total commitment to honesty in all aspects of life. It requires the practitioner to be truthful not only in their speech but also in their thoughts and intentions. By living with integrity and avoiding deception, individuals can build trust in their

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relationships and cultivate a clear, peaceful mind that is free from the complications of lying.

64. (B) Parasympathetic (Rest and Digest)
Yogic practices are highly effective at shifting the balance of the nervous system away from the stress-induced fight-or-flight response. Instead, they stimulate the rest-and-digest branch, which promotes relaxation and recovery. This shift leads to a lower heart rate, improved digestion, and reduced muscle tension. Activating this system is essential for maintaining long-term health and emotional stability in a stressful world.

65. (B) It focuses on performing one's duty without ego.
The path of action teaches individuals how to live a spiritual life while remaining fully engaged in the world. Its core principle is the performance of one's responsibilities with total dedication but without any attachment to personal gain. By focusing on the act of service and letting go of the ego, a person can achieve inner peace and spiritual growth.

66. (A) Fiery discipline or austerity
This personal observance refers to the heat generated by intense self-discipline and dedicated effort. It involves the willingness to endure discomfort or make sacrifices in order to achieve a higher spiritual goal. By practicing this form of austerity, individuals can strengthen their willpower, purify their character, and burn away the mental and physical impurities that hinder their progress on the path.

67. (C) Mudra
The classical eightfold system consists of specific stages starting with ethical guidelines and personal disciplines, followed by postures and breath control. It then moves into sensory withdrawal and the three stages of mental concentration. While certain hand gestures or energetic seals are used in various traditions to direct energy, they are not listed as one of the primary eight limbs.

68. (D) Better sleep quality and relaxation
This practice, often described as yogic sleep, is a powerful technique for achieving deep physical, mental, and emotional relaxation. It involves following a guided meditation while lying in a comfortable position. Because it systematically relaxes the nervous system and reduces deep-seated tension, it is exceptionally effective for improving sleep quality and helping individuals recover from the effects of chronic stress and exhaustion.

69. (C) Hatha Yoga
This branch emphasizes the use of physical techniques to prepare the body for spiritual awakening. By performing purification rituals and specific postures, practitioners aim to balance the vital energies within their system. The goal is to create a strong, healthy body that can withstand the intense focus required for meditation. It is often seen as a prerequisite for mastering more advanced mental disciplines.

70. (B) Yoga can help improve insulin sensitivity.
Clinical research suggests that specific yogic practices can be highly beneficial for individuals with metabolic disorders. By improving the body's response to insulin, these techniques help regulate blood sugar levels more effectively. Additionally, the reduction in stress hormones and the promotion of physical activity through postures contribute to better overall endocrine health, making yoga a valuable lifestyle intervention for managing diabetes.

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71. (D) Non-stealing
This third ethical restraint involves the practice of non-stealing in both a physical and mental sense. It requires refraining from taking things that do not belong to one and avoiding the desire for others' possessions. By cultivating a sense of honesty and contentment with what one has, the practitioner reduces the greed and envy that often lead to mental disturbance and conflict.

72. (A) To calm the mind and reduce anxiety
Control over the breath has a direct and immediate impact on the state of the mind. By slowing down and deepening the breathing pattern, practitioners can quiet the mental chatter and reduce feelings of anxiety. This practice helps to stabilize emotions and provides a sense of inner calm, making it a highly effective tool for managing stress and improving overall psychological well-being.

73. (C) Patanjali's systematization of Yoga
This era is defined by the work of the sage Patanjali, who took the existing, scattered traditions and organized them into a coherent philosophical system. His collection of aphorisms provided a logical, eight-stepped path for achieving spiritual liberation. This period marked the transition from diverse ancient practices to a unified and standardized methodology that continues to be the primary authority on yoga today.

74. (A) Jnana
The path of wisdom centers on the use of the intellect and higher knowledge to achieve spiritual freedom. It involves a process of constant inquiry and deep contemplation to understand the true nature of the self. By stripping away ignorance and false perceptions through the study of scriptures and logical reasoning, the practitioner seeks to reach a state of ultimate clarity and enlightenment.

75. (D) Dharana
This stage of the eightfold path involves training the mind to stay fixed on a particular point of focus. Practitioners may use internal objects like the breath or external ones like a candle flame or a mantra to build this one-pointedness. By repeatedly bringing the attention back to the chosen object, they develop the mental strength and stability needed for deeper meditation.

76. (B) Mind-body medicine/Complementary therapy
In the modern healthcare landscape, yoga is viewed as an integrative approach that connects physical movement with mental focus and breath regulation. Because it supports traditional medical treatments without being invasive, it is classified as a complementary therapy. This categorization recognizes its role in promoting holistic wellness by addressing the complex interactions between the mind, the body, and the overall quality of life.

77. (C) Increased oxygenation of tissues
Specific breathing exercises help to expand the lungs and improve the efficiency of the respiratory system. By training the body to take slower, deeper breaths, these practices increase the amount of oxygen available to the bloodstream. This leads to better oxygenation of the tissues and organs throughout the body, which enhances overall energy levels, improves cellular function, and promotes a sense of vitality.

78. (D) Integration of the individual self and consciousness
On a psychological level, the concept of union refers to the process of bringing the different parts of the human experience into a state of harmony. It signifies the integration of the individual's scattered thoughts and emotions into a unified state of consciousness. This sense of wholeness allows a person to experience a deeper connection with themselves and the world around them.

79. (A) Shatkarma
The classical eight-limbed system includes ethical rules, personal disciplines, physical postures, breath control, and sensory withdrawal, culminating in three stages of mental mastery. While physical purification techniques are an important part of some traditions, they are not listed among the primary eight stages defined in the classical path. Understanding these distinct categories is essential for a proper study of different yogic methodologies.

80. (B) Reducing attachment and greed
This ethical practice teaches individuals to let go of the desire to possess more than they truly need. By cultivating a sense of non-attachment to material objects and outcomes, a practitioner can free themselves from the burden of greed and the fear of loss. This leads to a simpler, more peaceful lifestyle where the mind is not constantly preoccupied with acquisitions.

81. (B) Mindfulness Meditation
This specific mental practice involves paying deliberate attention to the present moment while maintaining an attitude of curiosity and acceptance. Instead of reacting to thoughts or trying to change them, the individual simply observes them as they arise and pass away. This process helps to cultivate emotional resilience and reduces the impact of stressful thoughts, leading to a calmer and more centered state.

82. (A) Use of Mantras and rituals for focus
During the earliest period of development, spiritual practices were closely tied to the performance of sacred rituals and the chanting

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while simultaneously lowering levels of stress and anxiety. Furthermore, it aids in emotional regulation, allowing individuals to respond to challenging situations with greater clarity and composure rather than reacting based on impulsive or negative emotions.

28. (B) Pratyahara
The eight limbs are categorized into external practices that involve social conduct and the body, and internal practices that focus on the mind. The fifth limb acts as a crucial transition between these two realms. By withdrawing sensory attention from the outside world, the practitioner begins the process of internalizing their awareness, which is necessary for deep concentration and meditation.

29. (C) It was originally developed as a competitive sport.
Historically, this system was developed as a comprehensive methodology for spiritual growth and physical well-being. It was passed down through oral traditions within the ancient Indian civilization. Unlike modern athletics, it was never intended to be a competitive sport or a means of comparison between individuals. Its true purpose remains the internal realization of the self and the attainment of peace.

30. (D) P-2, Q-4, R-1, S-3
Various terms associated with the global yoga movement highlight its multifaceted nature. Some relate to the biological effects on the body, such as the regulation of stress hormones. Others identify the institutional and political support provided by government ministries and international organizations. Together, these elements reflect how an ancient tradition has been integrated into the scientific and administrative frameworks of modern society.

31. (A) Self-study and reflection on sacred texts
This personal observance involves the systematic study of spiritual scriptures and the practice of self-reflection. By engaging with wisdom from sacred texts, a practitioner gains a deeper understanding of their own nature and the universe. This intellectual and contemplative process is essential for personal growth, as it encourages the individual to apply philosophical principles to their own life and behaviors.

32. (B) Ishvara Pranidhana – Physical exercise
Personal observances are meant to cultivate internal discipline and spiritual devotion. While some practices focus on physical and mental purity or maintaining a state of contentment, others involve the surrender of the ego to a higher reality. Misidentifying this devotional practice as physical exercise ignores its spiritual essence. True yogic discipline requires both the active effort of the body and the humble surrender of the mind.

33. (A) Statement I is true, but Statement II is false.
Regular yogic practices are highly beneficial for improving sleep quality by helping the body maintain its natural internal rhythm. Techniques involving relaxation and slow breathing calm the nervous system, making it easier to fall and stay asleep. Contrary to misconceptions, these practices are often recommended as effective complementary treatments for individuals suffering from chronic insomnia and other sleep-related disturbances.

34. (A) Both A and R are true and R is the correct explanation of A.
These breathing techniques are designed to control and expand the vital energy that flows through the human system. This energy is considered the fundamental life force that sustains all biological and mental functions. By regulating the breath, practitioners can influence the flow of this energy, leading to improved vitality, a calmer mind, and better control over the body's physiological processes.

35. (B) Dharana – Dhyana – Samadhi
The final three stages of the eightfold path are often grouped together because they represent a continuous progression of mental focus. The process begins with concentrated effort on a single point. This evolves into a sustained and effortless flow of awareness. Finally, the practitioner reaches a state of total absorption where the self and the object of meditation become completely unified.

36. (D) Raja Yoga
Often described as the supreme or royal path, this branch of yoga focuses primarily on the mastery of the mind through meditation. It follows the systematic eight-limbed approach defined in

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91. (D) UN declared International Yoga Day
This year marked a turning point for the global recognition of yoga when the United Nations General Assembly officially designated June 21 as a worldwide day of celebration. The resolution was supported by a record number of countries, highlighting the universal appeal of the practice. This historic decision has since led to massive annual events that promote the health and wellness benefits of yoga.

92. (B) Exhalation
This term describes the specific phase of the breathing cycle where the air is expelled from the lungs. In the practice of breath regulation, this process is often performed slowly and deliberately to help calm the nervous system. Mastering this stage is crucial because it allows the practitioner to release carbon dioxide and tension, creating the necessary space for the next deep and revitalizing breath.

93. (C) Yama
The first limb of the eightfold path consists of ethical guidelines that govern how a practitioner interacts with others and the environment. These five social restraints include non-violence, truthfulness, and non-stealing. By following these moral principles, individuals can create harmonious relationships and a peaceful social environment. This ethical foundation is essential because it prevents the external conflicts that could otherwise disturb internal peace.

94. (D) Emphasis on health and stress management
In the current era, the practice has evolved to place a strong emphasis on physical fitness and mental well-being. Modern classes often focus on using postures and breathing techniques to counter the negative effects of a sedentary and stressful lifestyle. While still rooted in ancient principles, the contemporary approach is frequently adapted to meet the practical health needs of people in today's fast-paced world.

95. (A) Samadhi (Self-realization)
The entire eightfold path is designed to lead the practitioner toward a final state of total absorption and self-realization. This ultimate stage represents the culmination of all physical and mental training, where the individual ego is transcended and a sense of universal unity is experienced. Achieving this state is considered the highest accomplishment, bringing a permanent end to suffering and the attainment of peace.

96. (B) Niyama
The second stage of the eightfold path focuses on the internal rules and personal habits that a practitioner adopts for their own growth. These disciplines include maintaining purity, practicing contentment, and performing self-study. Unlike the ethical restraints that focus on social interactions, these observances are designed to build the individual's character and create the internal discipline necessary for advanced stages of spiritual practice.

97. (B) Inhalation
This term refers to the first phase of the breathing process, which involve drawing air into the lungs. In the context of breath control, this action is done with mindfulness to maximize the intake of vital energy. By performing this inhalation in a slow and steady manner, the practitioner can nourish the body's tissues and prepare the mind for the subsequent stages of focus.

98. (A) Reduced resting heart rate
Consistent practice has a profoundly positive impact on heart health by improving the efficiency of the circulatory system. One of the most noticeable benefits is a reduction in the resting heart rate, which indicates that the heart is working more effectively. By activating the body's relaxation response, yoga helps to lower the overall strain on the cardiovascular system and supports long-term heart health.

99. (C) Indus Valley/Ancient Indian
The roots of these ancient practices are found in the civilization that flourished along the Indus River thousands of years ago. Archaeological findings and early scriptures provide evidence of meditative postures and spiritual concepts that eventually evolved into the yoga systems we know today. This historical connection emphasizes the deep cultural and philosophical heritage that has sustained and shaped the practice throughout many centuries.

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of specific hymns. These activities were used to focus the mind and connect with the cosmic forces described in the ancient scriptures. This era laid the groundwork for future yogic philosophy by emphasizing the power of sound and the importance of mental discipline.

83. (C) Supportive and lifestyle-based
While yoga is not a replacement for traditional medical treatment, it plays a vital role as a supportive intervention for long-term health issues. By encouraging healthy habits, reducing stress, and improving physical mobility, it helps individuals manage their symptoms and improve their overall well-being. This lifestyle-based approach is particularly effective in addressing the complex factors that contribute to chronic diseases in modern society.

84. (D) Life force/Breath
The term refers to the fundamental vital energy that permeates the universe and sustains all living beings. In the context of the human body, it is closely associated with the breath, which is the most tangible manifestation of this energy. Understanding and regulating this force is a central goal of many yogic practices, as it influences both physical health and mental clarity.

85. (C) Asana
The third limb of the eightfold path is focused on the cultivation of a steady and comfortable posture. While often associated with various complex movements today, its original and primary purpose was to enable the practitioner to sit perfectly still for extended periods of meditation. Achieving this physical stability is necessary because a restless or uncomfortable body can easily distract the mind from deeper focus.

86. (B) Improved balance and fall prevention
For older adults, practicing gentle physical movements and balance exercises can significantly enhance their quality of life. These techniques help to strengthen the muscles, improve coordination, and increase body awareness, all of which are essential for preventing accidental falls. By maintaining physical mobility and mental alertness, yoga supports a more independent and healthy lifestyle for people as they age into their later years.

87. (D) Dharana, Dhyana, Samadhi
These final three stages of the eightfold path represent the internal practice of deep mental integration. When concentration, meditation, and total absorption are focused on a single object, it is referred to by this collective term. This advanced level of practice allows the individual to gain profound knowledge and mastery over the object of their focus, leading to higher states of spiritual realization.

88. (A) Mental discipline and meditation
This path, often referred to as the royal road, emphasizes the systematic training of the mind through meditation. It follows the eight-limbed structure and focuses on achieving self-realization by controlling the mental waves. Unlike other branches that may focus on devotion or physical mastery, this approach uses rigorous mental discipline to reach the ultimate state of stillness and clarity within the consciousness.

89. (C) Anxiety and Depression
Numerous clinical studies have demonstrated that consistent yogic practice can be an effective complementary treatment for various psychological challenges. By combining breath control with mindful movement and relaxation, individuals can experience a significant reduction in the symptoms of anxiety and depression. These practices help to stabilize the mood, promote emotional balance, and provide practitioners with better tools for managing the daily stresses of life.

90. (A) Swadhyaya
Personal observances are the second stage of the eightfold path and focus on individual discipline and internal growth. Among these is the practice of self-study, which involves reflecting on one's own character and studying spiritual wisdom. This contrasts with the social ethical restraints that govern behavior toward others. Cultivating these internal qualities is essential for building a strong and disciplined foundation for spiritual progress.

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